CHEMIST & DRUGGIST

THE NEWSWEEKLY FOR PHARMACY

1 July 1995

No other bath treatment works better or faster to relieve the maddening itch of eczema

BALNEUM* PLUS

BATH TREATMENT

Contains lauromacrogols and soya oil

Your serious first-line recommendation

MERCK-WHITEHALL DERMATOLOGICALS

Product Licence Holder E Merck Pharmaceuticals (a division of Merck Ltd), West Drayton, Middlesex. For further information please contact Whitehall Laboratories, Huntercombe Lane South, Taplow, Berks , SL6 0PH GSL *Trade Mark

WHITEHALL

NPA opts for expert stress line

Pharmacy Week '2' – the talks begin

Sports medicines on the fast track

An American approach to OTC profits

Update: from hepatitis to headlice

C&D business survey: script sales strong

Pharmacies put under the tax microscope

4711

ORIGINAL EAU DE COLOGNE

SPECIAL TRADE ANNOUNCEMENT

Following the announcement in June 1994 that Wella A.G. Darmstadt, had purchased the Muelhens Company interests worldwide, there will follow some changes within the United Kingdom. As in other major markets the brand will be handled by the local Wella Company.

Alberto Culver (UK) Ltd who have very successfully handled the distribution of 4711 brands for nearly twenty years, within Chemists and the Department Stores, will now handover all responsibilities to Wella GB as of 1 July 1995.

From this date all queries should in the first instance be referred to your Wella Representative. Alternatively please contact Wella Customer Services Manager on (01256 376185).

The Directors of Wella would like to thank Alberto Culver for their dedicated service and commitment to 4711 and for their full co-operation in the transfer of the distribution contract and to assure the trade that the brand will continue to receive the same level of support.

.....

Wilfried Richter
Chairman & Managing Director
Wella Great Britain

.....

Tom Monaghan
General Manager
UK Retail Division
For Alberto Culver Co (UK) Ltd

THE FRESHER YOU ARE THE BETTER YOU FEEL

COMMENT

Pharmacy Week has come and gone. From the evidence presented from the Shires in the pages of *C&D* pharmacists have managed to make a considerable impact at local level. This is as it should be, and what was hoped for. Local, rather than national, impact was always going to be the most important way in which pharmacy impressed itself on the public consciousness ... which is just as well. The national impact was muted, judging by the lack of launch photos in the dailies; the relatively few health professionals and policy-makers who made it to Westminster Hall; and the 20 or so MPs who visited pharmacy's leaders in the Palace of Westminster before, mid-proceedings, John Major announced his resignation (p6). What luck!

It is good that Pharmacy Week '2' is already under discussion (see also p6). Lessons will have been learned from the first foray and, doubtless, the second event will carry more national clout. While the peg of pharmacy excellence is laudable, the media usually requires a more tasty news nugget than 'goodness' – hence the infamy and column inches afforded to Gwent's Allan Sharpe and his NHS to private script conversion mill. The three Week surveys, commissioned to produce just such a memorable newsbite, failed to deliver.

Meanwhile, Ashwin Tanna continues to make the pharmacy news, apparently failing to get a judicial review of the Society's script faxing position. It is regrettable that he has been left to conduct his campaign in isolation. While professional bodies may still be hoping that legislation to outlaw the practice will be enacted shortly – thus following the Scottish precedent – those representing the independent are taking a risk in leaving Mr Tanna to do their dirty work, capable as he is. This Government has already failed once to legislate.

CHEMIST & DRUGGIST

Editor John Skelton, MRPharmS
Deputy Editor Patrick Grice, MRPharmS
Assistant Editor/Beauty Editor Liz Jones, BA
Contributing Editor Adrienne de Mont, MRPharmS
News Editor Ailsa Colquhoun, BSc
Business Editor Jackie Blondell, BA
Technical Editor Maria Murray, MRPharmS
Reporters Marianne Mac Donald, MRPharmS
Fawz Farhan, MRPharmS
Art Editor Tony Lamb

Price List Colin Simpson (Controller)
Darren Larkin, Maria Locke

Deputy Advertisement Manager Julian de Bruxelles
Doug Mytton, Martin Calder-Smith
Production Katrina Avery
Advertisement Director Frances Shortland

Publisher Ron Salmon, FRPharmS

Publishing Director Felim O'Brien

© Miller Freeman plc. 1995

Chemist & Druggist incorporating Retail Chemist & Pharmacy Update

Published Saturdays by Miller Freeman Professional Ltd Sovereign Way, Tonbridge, Kent TN9 1RW Telephone: 01732 364422 Telex: 95132 MILFRE G Fax: 01732 361534

Subscriptions Home £108 per annum Overseas & Eire £155 per annum including postage £2.25 per copy (postage extra)

Circulation and subscription Royal Sovereign House, Beresford Street, London SE18 6BQ Tel. 0181 855 7777

Refunds on cancelled subscriptions will only be provided at the publisher's discretion, unless specifically guaranteed within the terms of subscription offer

The editorial photos used are courtesy of the suppliers whose products they feature

Miller Freeman
A United News & Media publication

PPA

ABC
AUDIT BUREAU OF CIRCULATIONS
BUSINESS PRESS

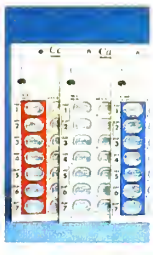
CHEMIST & DRUGGIST

THE NEWSWEEKLY FOR PHARMACY

VOLUME 244 No 6000 136th YEAR OF PUBLICATION ISSN 0009-3033

NPA launches expert stress line for pharmacists 4
24-hour helpline complements Society's service

Tanna fails to get script faxing judicial review clearance 4
Further oral hearing possible



Compliance aids from the NPA 4
Care-paks for institutions and the home ...
... plus Medicine Care Cards in NAHAT launch

Welsh pharmacist fined £16,000 5
Two-year gaol term given

How to make profit over the counter – US-style 16
Tony de Nicola on therapeutic niche marketing

Pharmacy update: hepatitis to headlice i-viii
And Steven Kayne's health screening guide

Cashing in on sports medicine 17
C&D special feature

Stable market for pharmacy as baby and beauty fail to improve 22
Pharmacies look on the bright side in *C&D* business survey

Behold, the taxman cometh: Inland Revenue reports ... 24
Could pharmacies be next in the tax action spotlight

Launch of NI Academic Pharmacy Practice Unit 30
Collaborative initiative for Pharmacy Week

REGULARS

News	4	News from the USA	16
Northern Ireland notebook	7	Business survey	22
Topical reflections	7	Business news	24
Counterpoints	8	Classified advertisements	26
Prescription specialities	12	Business link	28
Letters	14	About people	30

NPA opts for stress experts

The National Pharmaceutical Association is to set up a 24-hour telephone stress counselling helpline for NPA members, their families and staff from July 1.

The Association has opted for a confidential, professionally-manned operation, run by Employee Advisory Resource (EAR) and called the NPA Pharm-Assist Service. Counsellors can be reached on two numbers: 01895 237071 between 8.00am-10.00pm and 0800 243158 any other time. Enquiries can centre around personal, workplace or business problems. When considered necessary, and with the permission of the caller, enquiries will be referred to specialists. Face-to-face counselling opportunities with staff are also available.

The helpline, says Trefor Williams, the NPA's business services manager, aims to complement the in-house stress scheme recently set up by the Royal Pharmaceutical Society (*C&D* March 18, p438). He says: "We appreciate that pharmacists with some counselling training would have had a unique contribution, but the broad experience of a professional, full-time counselling service is equally beneficial when dealing with everyday stresses – the underlying causes transcend professions.

"To some extent, distance lends objectivity and greater confidence in confidentiality," adds Mr Williams.

The cost of running the service – which, when a joint scheme was being considered, would have cost the Society's Benevolent Fund £70,000 a year – has no direct relationship with current membership fees, he says.

It is also hoped to use service use statistics in future high-level professional discussions.

The NPA acknowledges clean air manufacturer Envair for the use of the company's Pharm-Assist trademark.

Tanna denied judicial review, but vows to go on

Ashwin Tanna's application for leave for a judicial review of the Royal Pharmaceutical Society's stance on prescription faxing has been refused.

A response from the High Court received by the London pharmacist on Monday read: "Leave refused. There was nothing unlawful, irrational or procedurally unfair ... in the Council statement. It will be a question of fact in any given case whether the practice complained of is professional misconduct."

Mr Tanna is interpreting this latter sentence as grounds to take the case to an oral hearing. "The judge is saying there is nothing unlawful. What I am saying is that it is unethical ... The judge is only looking at this from one angle," says Mr Tanna.

He has ten days from receipt of the judge's response to file an application renewal and is currently considering his next course of action. There is £5,500 in the Fighting Fund Against Non-contract Pharmacies, sufficient to fund an oral hearing, he says.

Should this find against Mr Tanna, there is no further redress. However, he has vowed to continue as far as possible.

Citing the delay in prescription turn-around caused by faxing, Mr Tanna asks: "Are non-contract pharmacies giving a proper professional service? These are questions that the Society should be answering, not me. I will try every avenue until somebody can convince me that I should stop."

NPA's own-brand MDS care packs

The National Pharmaceutical Association launched its own-brand monitored dosage system compliance aids – Care-paks (for institutions), Care-paks at Home and Medicines Care Cards – at the Glasgow NAHAT Conference last Wednesday.

The Care-pak features a cold-seal, carded, blister system that is colour-coded to match, and to be fully compatible with, existing systems, such as those produced by Boots the Chemists.

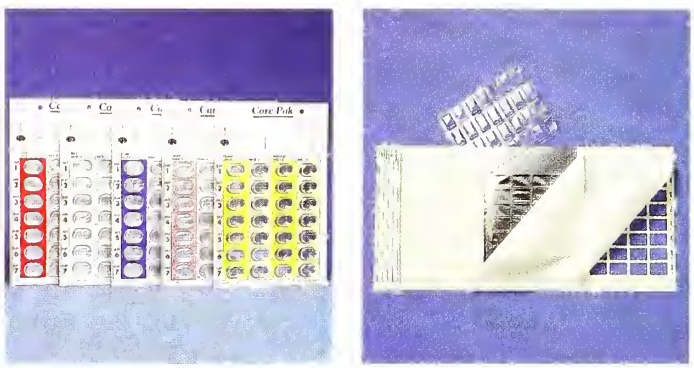
Manufactured in the UK, utilising industry-standard materials, Care-pak operates without expensive heat sealers and their associated trappings, the NPA says. Pharmacists can also 'buy as they go' to avoid significant stock investment.

Care-pak at Home wallets also cold seal and have slots for a seven-day, four times daily dose regime, with ample space on the front for medicine labels, a side panel for identifying medicines in use by colour, code and type, and an internal pocket/flap for medicine information leaflets.

Both Care-paks are disposable, hygienic and, says the NPA, eliminate the problems associated with recycling cassette-based systems for homes, and the potential hazards linked with all heat-sealing.

Care-paks have been trialled by community care pharmacist Gillian Arr-Jones at the Princess Royal Hospital, Haywards Heath, where they have been used for patients going back home, with carers finding them "particularly useful for checking medication is being taken correctly".

The Medicines Care Cards have been developed with Dr Theo Raynor of St James' and Seacroft Hospitals NHS Trust, and record patient details, medicines being taken and dosage timing.



Care-paks for use in institutions and (right) Care-pak at Home, showing the ease of cold-seal assembly

GPs call for 'loophole' closure

Doctors have called for a "speedy resolution" of the loophole in the Clothier Regulations.

The flawed dispensing regulations in parts II and 12 of the NHS (Pharmaceutical Services) Regulations 1992 are threatening the fabric of general practice in rural areas and need to be revised "urgently", concluded last week's annual Local Medical Committees Conference.

● The Association of the British Pharmaceutical Industry is concerned that the Conference supported the General Medical Services Committee's proposals on the introduction of a national formulary linked to a prescription charge policy. This would see a 'best buy' formulary of drugs pegged to a lower script fee, while those drugs not on the formulary would attract a higher charge (see *C&D* May 20, p807).

The ABPI believes such a move would lead to a two-tier service, less GP prescribing freedom, an increase in health costs and less incentive for pharmaceutical companies to invest in new drugs.

● Travel vaccination is to remain on the NHS because GPs fear that any change would put travellers at risk. In a survey of 30 GPs in May conducted by Research Services, 57 per cent disagreed with taking immunisation off the NHS.

● The GMSC got a rap on the knuckles from the Conference for not reversing its pro-generic substitution stance, which was deemed "ill-conceived".

● GPs want a separate contract for out of hours work and have endorsed a six-point plan to resolve the current dispute with the Government.

● Doctors are to debate whether computerised signatures on repeat prescriptions should be given legal status at next month's British Medical Association's annual representatives' meeting.

Local Labour Party opposes rural pharmacy

The Labour Party in Mid-Glamorgan is backing a fight against a proposed pharmacy.

W O Davies & Sons has applied to open a pharmacy in the village of Creigiau. The company owns another pharmacy in Pontypridd and, as such, is already on Mid-Glamorgan Family Health Services Authority's pharmaceutical list. This allows the application to benefit from the so-called Clothier 'loophole' where only desirability and necessity need to be determined.

Residents of Creigiau and nearby Pentrych have asked Mid-Glamorgan Labour Party to help, fearing the closure of two dispensing doctors' practices in the villages. In response, Party members published and distributed a 'Pharmacy Fact Sheet' to 2,000 homes in the area. The information in the leaflet was provided by the surgeries' practice managers and "our own informal network", says Labour county councillor Christine Priday.

The Fact Sheet states that while a pharmacy "may seem attractive on the surface, it will be detrimental in the long-run". It asks patients to sign a petition, which the Labour Party is helping distribute on behalf of the GPs.

Defending Labour's move, Ms Priday says: "The doctors offer a more secure service that will last into the future."

The Labour Party does not have a national policy on this issue. However, in a rural policy document, it states: "Small rural pharmacies give invaluable advice to thousands of people every day. We recognise that where there is no proper pharmacy, pharmaceutical services based in GP surgeries are essential for local people."

Mid-Glamorgan FHSA is expected to reach a decision on the application on July 12.

Welsh pharmacist jailed for two years

Deeside pharmacist David Evans has been jailed for two years and ordered to hand over £16,000 of his profits after being convicted of illegally supplying drugs.

Charges that he had supplied class A drugs, had falsified a prescription record and had attempted to pervert the course of justice by allegedly trying to influence witnesses were not proceeded with, but were allowed to remain on the file.

At the Mold Crown Court hearing on June 15, the prosecution said that a check at the defendant's shop in Connah's Quay High Street, Clywd, showed about 16,000 temazepam capsules and tablets were missing.

The prosecution claimed that Mr Evans must have been supplying the class C drugs illegally to drug abusers.

Defending, barrister David Steer said that his client was ruined professionally and it was inevitable that he would be struck off.

Mr Evans strenuously denied the supply allegations and said that he knew nothing of the discrepancy until the police investigation and could only suggest that they must have been stolen.

Mr Steer asked the judge to sentence on the basis that, despite the jury's verdict, there were still many mysteries surrounding what had actually happened. There was no real evidence about where the capsules had gone.

Judge Sir Robin David said that it was an extremely sad moment for him to sentence the defendant, bearing in mind the very high regard in which he was held by the local community.

"It is quite clear that you have been a great help to the elderly and infirm, and you are very highly regarded by them all," he said. However, Sir Robin continued, he was a pharmacist running a shop and the case involved a large amount of class C drugs.

"I am really left with no alternative but to impose a custodial sentence," he said.

Alcock to leave DoH

Pharmacy pay negotiator Stephen Alcock is to leave the Department of Health, although it is understood he will stay until the finish of the current negotiating round.

His replacement has not been announced, although John Thompson, who replaced Melvyn Jeremiah as DoH under secretary at the end of March, is being tipped as a contender.

As Mr Alcock leaves to join the teaching profession, Bryan Hartley is to become full-time chief pharmaceutical officer, based at the Department in London. Following internal structural changes, his office will be staffed by three chief officers: Laraine Clark, Catherine Dewsbury and Dianne Kennard, plus a principal pharmaceutical officer, Jeannette Howe.

An additional principal pharmaceutical officer post, currently filled by Rob Darracott, and the position of deputy chief pharmacist, soon to be vacated by Jon Merrills, are transferring to the community pharmacy branch.

Packages of Care from NPA

The National Pharmaceutical Association has launched three leaflets promoting new NPA 'Packages of Care'.

They include: 'Caring for people at home', pointing out members' roles in looking after carers and assessing patients' needs; and 'Mental health in the community', outlining compliance, particularly in special need groups, plus advice and information provision.

For GPs, the NPA is launching 'Cost effective prescribing and better patient care', covering pharmacists' advice in PACT data interpretation and formulary development.

Although the leaflets have been designed for the NPA's debut stand at the National Association of Health Authorities and Trusts annual conference (June 28-30), they will also be used by the recently-recruited team of pharmaceutical services co-ordinators to promote the NPA Packages of Care theme at a local level. Additional packages may be added, says the NPA.

The NPA stand at the annual NAHAT conference, where staff will highlight member services, including medication management, care for carers and the cost of bad medication management

FP10 delay

Extended consultation with the DoH over new-style FP10s will delay the laying of relevant regulations until August 1. Until such time as legislation is put before parliament, pharmacists should continue as before, says PSNC.

NOAH updates

The National Office for Animal Health has updated its booklet, 'Withdrawal periods for veterinary products'. The June 1995 booklet replaces the March 1994 edition. Copies, price £2.50, are available from NOAH. Tel: 0181 367 3131.

Eczema Week

This year's National Eczema Week will focus on the impact the condition has on work, both in terms of days lost and dealing with contact irritants. It will run from September 30-October 7, backed with a resource pack for health professionals and a free fact sheet giving 20 tips on eczema at work.

Calls for evidence research

'Acting on the evidence – a review of clinical effectiveness: sources of information, dissemination and implementation', a new study by ABPI and NAHAT, calls for more evidence-based research to improve clinical effectiveness. Available from NAHAT at £22 for non-members and £15 for members.

Script leakage investigation

The National Addiction Centre is conducting a study into the leakage of prescription drugs onto the black market. The study began in March and is due for completion in late 1996. The Department of Health is also considering what further advice should be issued to family health services authorities on the powers they have to examine CD prescribing and to GPs on benzodiazepine prescribing.

FHSA expenditure

Net ingredient costs for drugs and appliances used in the treatment of asthma were highest (in descending order) in Lancashire, Hampshire and Essex FHSAs. Essex, Lancashire and Kent FHSAs recorded the highest (in descending order) net ingredient costs for drugs in the treatment of respiratory system disease treatment. These could reflect the FHSAs' size, Gerry Malone, the minister for health, said in a written parliamentary answer.

Pharmacy week to run again?

The NPA Board has postponed making a decision on a second Pharmacy Week. At its June Board meeting, preliminary results of the campaign were discussed and members expressed delight at the local level of success – the result of local and central efforts – but disappointment at the lack of national coverage of the photo opportunity.

It was decided to debate the possibility of a second campaign and its *modus operandi* at the next Board meeting, following a more conclusive presentation by a publicity sub committee.

Regional organisers have also considered their support for a second promotional week, should it be organised.

Peter Jenkins, Mid-Glamorgan LPC chairman, reports a successful Pharmacy Week in Wales and a well-attended Welsh School of Pharmacy event. Wales would be happy to try anything, he says, "that raises the profile of the profession and proves its worth", but "would be concerned about trying it too quickly". The campaign, he says, might be better organised at a regional, rather than central, level with money available regionally, rather than centrally.

Derek Lawson, Pharmaceutical Society of Northern Ireland secretary, feels the Week has been "reasonably successful" despite, as yet, little feedback from the participants.

Although there have been no discussions at Council level over a second Pharmacy Week, Mr Lawson feels that an on-going event should be considered. "There is no such thing as a one-off PR event; you have to continue to build up an image," he says. Regional PR might be one option for consideration.

Scottish Executive assistant secretary Dr Lindsay Howden says coverage of the Week "exceeded expectations", but that the Executive "would have to sit back and look at exactly what [it] got out of the Week in terms of increased customer traffic" before supporting a second.

Unichem pharmacists got together to man a healthmobile outside Croydon's Whitgift shopping centre on June 23. Shailesh Amin (left) demonstrated inhaler technique, Charles Smallwood (centre) offered careers advice, while Raj Patel (right) and five other colleagues reviewed medication

West Yorkshire on show

The benefits of prescribing advice by community pharmacists (formulary development) and how pharmacists can help in health promotion and in the provision of domiciliary visiting were outlined in a recent West Yorkshire LPCs' pharmacy awareness day.

Also on show were posters and exhibition stands explaining additional pharmacy services, such as compliance aids and smoking cessation.

Pharmacists attending the day considered it a useful promotional event, as did Helen Robinson, a principal at the Department, who is said to have enthusiastically reported her findings back to base.

Helen Robinson, a principal at the Department, talks through potential pharmacy services with Pontefract pharmacist, Phil Bratley

Commons commotion

Just to show how unpredictable the world of PR can be, MPs attending Pharmacy Week's Thursday House of Commons reception suddenly heard of John Major's resignation and, in the words of the organisers, headed for the bars and tea rooms to gossip and plot.

Despite the circumstances, 27 MPs saw the exhibition, including health secretary Virginia Bottomley, health select committee chairman Marion Roe and Liberal Democrat deputy leader Alan Beith.

And there was a plethora of pharmacy figures: RPSGB president Ann Lewis, RPSGB secretary and registrar John Ferguson, NPA chairman Tim Astill and the Pharmaceutical Services Negotiating Committee's David Sharpe and Steven Axon.

Essex secures talks with local chiefs

Essex pharmacists secured a promise of further negotiation with local health authorities, following their Pharmacy Week awareness presentation.

The evening aimed to communicate to local decision-makers and opinion-formers areas of potential community pharmacy service development. These include: community pharmacy services, education and audit, GP liaison, services to home and hospices and domiciliary visiting.

(Left to right) Essex FHSA chief executive Graham Butland listens as Bharat Patel expands on his presentation to PSNC chairman David Sharpe

Essex Local Pharmaceutical Committee chairman, Bharat Patel, told local health authority, social services and voluntary organisation managers "pharmacy is now entering a new era".

Pharmacists who, according to Mr Patel, had already started to advance beyond "being involved in the dispensing function of prescriptions only" were also present to discuss current initiatives while packs, outlining the five key development areas, were also available.

● Romford's MIM Pharmacy enlisted the help of local MP Sir Michael Neubert to pick the winners of its competitions.

With over 500 entries in three competitions, it wasn't an easy task. And it didn't end there, owner Tariq Mahmood used the competitions as way of raising money for the St Francis Hospice – where Sir Michael presented a cheque for £510 last Friday.

Kissing children and signing autographs ... it's all part and parcel of a politician's life, especially those representing pharmacy during Pharmacy Week. Ann Lewis was on hand on the Saturday to promote her fellow Clywd pharmacists on their Wrexham town centre stand. Wrexham mayor, Dr John Marek, and Roger Roberts, principal pharmacist (nursing homes), at Clywd Health Authority (rear, right-left) were also on hand

N IRELAND NOTEBOOK

Rota warfare

Newtownards pharmacists are enraged and have enlisted the support of many, including the borough council, in voicing their grievances. Since one among them has decided to break the evening rota agreement and remain open on weekdays until 9.00pm, they claim that the viability of the official weekday rota service is being threatened. I have sympathy with them.

No doubt the contractor who has decided to break the rota will satisfy himself that this is providing a useful service to the public. They will appreciate the convenience of a late-evening pharmacy that they can drop into without the bother of having to consult a rota card. He will also claim that he is being selfless in his actions, since he is providing a service at no cost to the health service, and I'm sure the area health board may find this reassuring. The other contractors may seem selfish in their protestations. They may only appear to be concerned at their loss of revenue from this competition – not behaviour fitting of the '90s.

This situation exemplifies the tenuous links that bind our profession. It gives a glimpse of things to come, especially when more monies from the global sum are devolved down to board level.

In the long-term they will, like the rest of us, lose out

The contractor that first broke the rota in Newtownards has now been followed by a second, who has probably said "if you can't beat them join them".

What has to be remembered is that the rota service is paid for by the board and it may ask why it should do so when contractors are open without payment.

Breaking rota agreements is not a new phenomenon and has been a problem in Derry City for some years. I only wonder if those doing so are willing to open on the less lucrative, less convenient days, like public holidays, without rota payment.

I hope they remember that their activities are detrimental to the overall health of the profession, one that gives them their livelihood. Their actions may bring them benefits in the short-term, but in the long-term they will, like the rest of us, lose out.

Written by a practising N Ireland community pharmacist.

Topical Reflections

A private issue, or a public persuasion

I am sure that Allan Sharpe considers he has always had very good reasons for treating NHS prescriptions as private when to do so would cost the patient less than the prescription charge, but if the practice were regularised, the consequences could be divisive for community pharmacists and not necessarily to the advantage of all patients (*C&D* June 24, p989).

I have every sympathy for the patient who has to decide their priority of expenditure when asked for £5.25 per item, but whatever my political persuasions, this charge is a lawful tax and, if circumvented by pharmacists, would either be levied at an even higher rate on those prescriptions remaining or the present exemption categories would be revised in order to maintain the taxation status quo. That probability, coupled with the prospect of an American-style free for all in prescription pricing, leads me to the conclusion that Allan's understandable moral stand could be of mixed blessing.

The consequences of ill-considered political decisions are best left to the politicians to justify. However, with enthusiasm I help patients decide whether they should have their non-exempt prescription for non-POM medicines dispensed or to purchase it over the counter.

In this I am as helpful as I can be by providing information but, at the end of the day, it is their choice. If I am never presented with the prescription, then I can hardly be in breach of my contract.

Sainsbury to slice the NI pharmacy loaf?

Sainsbury has just announced that it is to open seven superstores in Northern Ireland, thus allowing the population the benefits of a phenomenon for so long enjoyed by the rest of the UK.

At the same time, 2,000 new jobs were announced, but without any mention of the jobs that will be lost locally, the consequential reduction in community services, or the financial loss to the economy from profits retained by Sainsbury which would otherwise be locally re-circulated.

Sainsbury is not a philanthropic institution and the bottom-line reason for this expansion is profit – its profit – and at the expense of local traders, including community pharmacists. This loss will apply not only to NHS prescriptions – if contracts are applied for and granted – but will also apply to a range of counter lines which are an integral part of the viability of community pharmacy.

Presently, Northern Ireland enjoys a high ratio of pharmacies to population, but many will be under financial pressure and may close once these superstores have been opened and the true loyalties of their customers tested.

I suppose this is the march of progress, but I regret its happening. The friendliness that is the hallmark of all Irish hospitality will now start to be eroded, be it by Sainsbury, Tesco, Dunn or Safeway, until the utilitarian, one-stop shopping trip becomes as depressingly familiar in Northern Ireland as it is here.

A burden of care for the mail?

My thanks to both Mark Cooper, head of retail marketing at Goldshield Healthcare, and to Anis Kapadia, mail order controller, Natural Care Direct, for clearing up my confusions over the relationship between their two companies and the different markets within which they both operate (**Letters** June 17). I also appreciate their candour in not seeking to hide their companies' commercial connections.

I am pleased and reassured that market research has shown that customers tend to demonstrate product loyalty towards either retail or mail order purchase, which means that, after all, I should no longer consider mail order companies as my competitors.

I am, however, also grateful to an anonymous benefactor for sending me Natural Care Direct's latest health supplement brochure and the reference to pages 20 and 21, where the virtues of Imuderm and Infaderm are extolled to their customers for mail order purchase. Unfortunately, my dilemma now continues unresolved!

Midrid goes over the counter

Midrid is now available in an OTC pack for the treatment of migraine and throbbing headaches (15, $3.95).

Owned by Shire Pharmaceuticals, the new pack will be distributed by Rhône-Poulenc Rorer Family Health Division. The prescription pack of 100 capsules will still be available from Shire Pharmaceuticals.

Each capsule contains paracetamol 325mg and isometheptene mucate 65mg, which constricts dilated blood vessels. The initial dose is two capsules, with a further three at hourly intervals, if necessary. The maximum dose is five capsules in 12 hours.

A launch 12 for 10 deal gives a POR of 44 per cent, backed with POS materials and support for staff training. Rhône-Poulenc Rorer Family Health Division hopes to establish the product first through pharmacy recommendation and will then consider introducing advertising to consumers.

Rhône-Poulenc Rorer Family Health Division. Tel: 01323 534000.

Galpharm launches GSL ibuprofen

Ibuprofen 200mg tablets will be available as a GSL item for the first time in the UK, courtesy of Galpharm International.

The 12-tablet packs (retail £1.29) will be distributed from mid-July to both pharmacy and non-pharmacy outlets.

Patient information will be more comprehensive than for the larger Pharmacy packs and point of sale material is currently being developed.

Galpharm also plans to support the product with advertising in the women's press and mass readership magazines.

Galpharm International Ltd. Tel: 01484 722242.

Aristoc puts its best foot forward with new image

This autumn sees the introduction of a new-look, rationalised range of Aristoc hosiery.

At the same time, the company is discontinuing the Bear Brand range, following its acquisition of Hartstone Hosiery.

Extensive consumer research for Aristoc revealed that consumers found the $400 million hosiery market confusing and cluttered.

The company is attempting to clear up this confusion with an updated and uniform look, which includes a new, more flowing logo.

On-pack product information has been simplified, with a standard sizing chart (and marked S, M and L as opposed to 1, 2 and 3). Packs are also now colour-coded (indicating denier/sheen, etc).

Prices range from $0.99 to $8.99.

New product development for the range includes the introduction of 3-D Lycra products to its Perfect Fit line. This uses advanced Lycra technology, where the fibre is present in every stitch (as opposed to every other stitch).

A press campaign will run in the women's press from October until March, 1996, featuring a dramatic new visual where the model appears to be nude (but is in fact wearing tights). This will also be used in a London-based poster campaign.

● Aristoc says that hosiery sales through chemist outlets have grown by 2 per cent year on year to 12 per cent, while department stores have witnessed a significant decline.

Aristoc Ltd. Tel: 01773 525525.

It musk be the vanilla talking

Following on from the success of Vanilla Fields, Beauty International is continuing to pioneer this fragrance category with the September introduction of Vanilla Musk.

The dominant vanilla note of the new fragrance is tempered with musk and sandalwood, resulting in a warm and lasting perfume.

Musk is more popular with younger consumers than it has been in the past due to the success of The Body Shop's own-label White Musk.

Packaging is simple, with clear bottles and copper caps, and white outer cartons.

There are six skus: 15ml, 30ml and 50ml eau de toilette sprays ($3.99 at launch only; rrp $5.95, $8.95 and $12.95 respectively), body spray mist (150ml, $3.95), body lotion (200ml, $3.95 at launch, rrp $4.95) and shower gel (200ml, $3.95).

A special merchandiser unit is available with a show card depicting the press advertising.

The $750,000 ad campaign kicks off in September in a range of women's titles, including *Cosmopolitan*, *Company*, *She* and *Prima*, and includes scent strips.

Beauty International Ltd. Tel: 01734 302302.

'Preparation H' gets piles of drive

Preparation H is to receive $500,000 of national and women's press advertising throughout the summer and autumn.

Quarter-page ads run in a range of titles, including *The Mirror*, *News of the World*, *She*, *Bella*, *TV Times* and *Practical Parenting*, will emphasise the efficacy of the brand in shrinking piles, and give the telephone number of the new 'HELPS' line. Coupons in the national press will offer samples.

Whitehall Laboratories Ltd. Tel: 01628 669011.

Impulsive ads

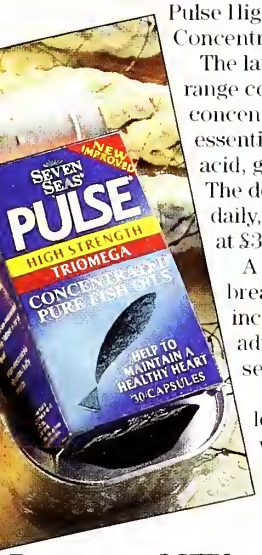
Elida Gibbs is adding press advertising for Impulse Vanilla in July and August.

This backs the 30-second TV ad for the new variant which broke in mid-June, as part of a £4.5 million media campaign.

Elida Gibbs Ltd. Tel: 0171 486 1200.

Stronger Pulse

Seven Seas has taken note of the trend for higher vitamin and mineral concentrations, and launched Pulse High Strength Triomega Concentrated Pure Fish Oils.



The latest addition to the Pulse range contains twice the natural concentration of the omega-3 essential fatty acid ecosapentanoic acid, giving 200mg per capsule. The dose is one to two capsules daily, with a pack of 30 retailing at $3.99.

A $500,000 support package breaks this month and will include national press advertising and PR, with a second burst in October.

Pulse is said to be brand leader in the fish oils sector with a 70 per cent share.

Seven Seas Health Care Ltd. Tel: 01482 75234.

Durex on MTV over Europe

A pan-European television advertising campaign for Durex has just broken on MTV Europe.

It aims to break away from traditional safe sex scare tactics with the message that 'Feeling is everything'.

Emphasising the sensuality of touch, the commercial casts an actor who, in the final scene, is seen to be blind.

LRC Products Ltd. Tel: 01992 451111.

Down the herbal Lane

Lanes' natural herbal medicines are now available through pharmacies - thanks to the European Commission.

EC regulations require herbal medicines to have a licence and patient information leaflet. As a result, the company has repackaged its range and made it available to pharmacists. Previously, only one of its products, Naturest, had pharmacy distribution.

The 18-strong line offers the herbal answer to indigestion, water retention, colds, insomnia and other common complaints. Prices vary from $1.70-$5.40. Merchandising is also available.

The products are being supported with various inserts in the consumer press.

G R Lane Health Products Ltd. Tel: 01452 524012

Sword kicks

Protector and Metal Protector packs are carrying a mini edition of the football magazine FourFourTwo, and a coupon for consumers to order the full-size version.

Wilkinson Sword Ltd. Tel: 01494 533300.

Pepper mix

Dr Pepper is offering 7,500 consumers a 'Dance Mix' CD with its latest on-pack promotion. A media blitz is in the offing, featuring coverage in the national and regional press and a nationwide cinema and radio advertising campaign.

Foodbrokers Ltd. Tel: 01705 219900.

Faster Fuji

Fujifilm is sponsoring a Mint Motorsport Ford Mondeo in the British Touring Car Championship.

Fuji Photo Film (UK) Ltd. Tel: 0171 586 5900.

Pearl Drops

The consent order limiting the brand's ads claims applies only in the US.

Carter Wallace Ltd. Tel: 01303 850661.

Delph move

The Delph skincare range is now under the new ownership of Miners.

Miners International Ltd. Tel: 01276 685898.

Senokot Guide

Senokot have launched an A4 laminated guide designed as an algorithm, for pharmacy assistants on managing constipation.

By fax from Reckitt & Colman. Tel: 0171 823 8089.

Good Griffe

Last week technical gremlins resulted in the printing of an early version of p1000 and the omission of International Classic Brands' full telephone number (0181 579 6060) from the Ma Griffe repackaging story. Revlon 's number was part-printed in its Jetliner story and should have read Revlon International Corporation. Tel: 0171 629 7400.

X-rated lipstick

Ultima II's new lipstick gets a triple 'X' rating. Called Lipsexxxy, it was a huge success in the US and is now being brought over here.

Lipsexxxy has a patent-pending formulation, which has a 'wet' to 'set' formula that works in under a minute and lasts all day.

Retailing at $11.50, it comes in ten shades and is presented in a glossy, black casing.

Revon Intenational Corporation. Tel: 0171 629 7400.

Elegantly Soft & Gentle

Soft & Gentle roll-on anti-perspirant deodorant now comes in a taller, slimmer pack for a "more elegant feel and greater on-shelf presence".

The new packs are available from mid-July in all three recently-updated fragrances.

Colgate-Palmolive Ltd. Tel: 01483 302222.

Everything's all white with Yardley

White Lavender, the new fragrance from Yardley, has the potential to become the new icon brand for company, says Yvette Young, senior product manager.

Developed in conjunction with fragrance and style guru Ann Gotlieb, the lavender note is enhanced by top notes of orange, bergamot and mandarin; heart notes of jasmine and papaya; and base notes of cedarwood, vanilla and musk.

Available from mid-September, there are six skus: eau de toilette (30ml, $8.95), gentle body mist (100ml, $2.95), moisturising body balm (200ml, $4.75), pampering creme bath (200ml, $4.75), shower creme (150ml, $3.95) and moisturising soap (100g, $1.95). A 15ml trial size eau de toilette will also be available during the launch period, retailing at $5.95.

Packaging features an illustration of the white lavender flower on a clean white matte carton. All products are contained within a misted glass bottle which is droplet-shaped.

A $800,000 advertising campaign will break in the women's press in September, using the tagline 'More than a fragrance, a total experience'. The ads will include a scent strip and run until December. POS material is also available.

Yardley of London. Tel: 01268 522711.

It's a wrap with Laura Biagiotti!

This August, Parfums Laura Biagiotti is giving away a satin-feel robe with every purchase of a 50ml eau de toilette in either Roma or Venezia perfumes (rrp $33).

The knee-length robe has a lightweight feel, kimono-style sleeves and two deep patch pockets.

Giorgio Beverly Hills. Tel: 0171 495 2121.

Wasp-eze re-pack adds bite

Wasp-eze 30 and 60ml sprays have replaced the old variants in a CFC-free formulation.

New POS showcards, shelf edgers and Wasp-eze 'bugs' are now available to complement on-going four-colour advertising that will run through the main holiday season in women's magazines.

Seton Healthcare Group plc. Tel: 0161 652 2222.

Almay perfects mascara

Perfect Definition Mascara is, Almay says, the first product in a new line of "stylish, high-quality cosmetics".

Presented in a silver casing, the brush wand is designed to evenly distribute the mascara, separating and shaping the lashes. Available in three shades, it will retail at $7.50.

Revlon International Corp. Tel: 0171 629 7400.

This year Alka-Seltzer

BRINGS YOU

Christmas in July

ALKA-SELTZER is back on TV in July, at Christmas and New Year's levels, to deliver holiday makers to your checkout before they pack their bags for foreign parts... and foreign food and drink. The TV message is: 'Pack Alka-Seltzer and you'll be ready with the Feel Good Fizz when foreign fare tempts you to overdo it.'

Get a grip with Oral-B

The new Oral-B Advantage Control Grip adds a new dimension to the Advantage range of premium brushes with a unique rubber handle, designed to fit the contours of the hand.

Oral-B says this handle provides maximum manoeuverability, while preventing the brush from slipping, which can cause damage to the teeth and gums.

The new brush also features long, angled filaments to reach posterior teeth and into interdental spaces ('Power Tip'); and multi-level filaments ('Action Cup') to give high levels of cleaning along the gum margins.

The blue Indicator filaments fade in colour as the brush wears out, showing at what time the brush should be replaced.

Oral-B Advantage Control Grip retails at $2.29 and is positioned as a premium product. Support for the launch of the brush includes a high-profile marketing campaign, advertising, PR, merchandising and posters/leaflets to all dentists.

Jenny Phillips, trade marketing manager for Oral-B, says the company has now produced its "most innovative product" to date.

Oral-B Laboratories Ltd. Tel: 01296 432601.

Heading out of the black with Oxy

The latest addition to Smithkline Beecham's Oxy range promises to banish blackheads and blocked pores.

The GSL Oxy Blackout contains a mixture of alcohol, water and butociam benzoate, which is said to bond with the dirt and dead skin cells that form blackheads. It is then removed using specially-designed medical tapes, avoiding skin damage. This can be repeated up to three times on the same area, for up to three times a week. Each tape can be used twice.

SB claims the method of removal is revolutionary and will create a unique position in the market for blackhead products.

Each Oxy Blackout pack contains a bottle of clear liquid, 24 Blackout tapes and a consumer leaflet. With a GSL status, it will retail at $3.99.

The launch will be supported by a series of advertisements plus money-off coupons and reader offers in the teen press.

Smithkline Beecham Consumer Healthcare. Tel: 0181 560 5151.

Scott goes soft on luxury tissue

Scottonelle Hypo-allergenic is the first product in a new range of toilet tissues which will focus on effective cleansing.

Scott says Scottonelle (four-packs for around $1.99 rsp) embodies a new advanced personal hygiene concept. It will be developed during 1995-96 in the super-premium category, featuring the "very best in quality and softness". The tissues are non-irritant .

A $5.5 million TV and press advertising campaign will break later this year.

Scott Ltd. 01474 336000.

Scholl adds soul!

Free soul music compilation cassettes worth £7.99 are available to purchasers of Scholl Blister Treatment this month.

In August, the product will be advertised in the women's press and men's special interest titles, backed by further sampling in core press throughout the year.

Natural Toiletries are to have a display and price promotion.

Scholl Consumer Products Ltd. Tel:01582 482929.

Backing from the horse's mouth!

Mane 'n Tail horsy cosmetics range is to be backed to win by Straight Arrow with a £500,000 promotional spend.

POS and sampling through the women's press is being launched now with an advertising campaign to follow in the same media later in the year.

Grafton International. Tel: 01543 480100.

Sominex wakes up market with £1m television campaign

Sominex is on national television for the next four weeks.

Ten- and 30-second advertisements impart the message that the brand offers sufferers of occasional sleeplessness a refreshing and quality rest.

In the Grampian and Scotland regions, the same campaign will run for six weeks, while on GMTV the ten-second ad will be screened to catch people who have just woken from a bad night's sleep.

The commercial features a modern-day version of the Princess and the Pea fairy tale, and the 'Sominex - you can sleep on it' copyline.

Smithkline Beecham Consumer Healthcare. Tel: 081 560 5151.

Satin Care takes TV stage

Gillette's Satin Care is to go on television for the first time with a 30-second commercial focusing on its close, comfortable, smooth shave benefits.

The company aims, within a year, to recruit 9.5 million women, who currently use soap and water to shave, into the Satin Care and Sensor for Women regimes, using £4 million media support.

Gillette UK Ltd. Tel: 0181 560 1234.

ON TV NEXT WEEK

Beckman Stain Devils: GMTV

Beconase Hayfever: A, LWT, CAR

Dove Bar: Allareas

Dove Shower: All areas

Fujicolor Super G film: C4, ITV

Imperial Leather extra care: All areas

Johnson's Baby Bath: ITV, C4, GMTV, BSkyB

Johnson's Baby Oil: All areas

Kodak Fun Single Use Camera: BSkyB, C4

Kodak Gold film: ITV all regions, C4, Satellite, HTV

Matey Bubble Bath: Satellite

Mum deodorant: All areas except B, CTV, W, GMTV

Oz superstrength kettle descaler: GMTV

Rennie: All areas

Seven Seas Cod Liver Oil: GMTV, HTV, Y, G

Slim Fast: All areas

GTV Grampian, **B** Border, **BSkyB** British Sky Broadcasting, **C** Central, **CTV** Channel Islands, **LWT** London Weekend, **C4** Channel 4, **U** Ulster, **G** Granada, **A** Anglia, **CAR** Carlton, GMTV Breakfast Television, **STV** Scotland (central), **Y** Yorkshire, **HTV** Wales & West, **M** Meridian, **TT** Tyne Tees, **W** Westcountry

SCRIPTspecials

Cefrom

Hoechst Roussel has launched Cefrom (cefpirome sulphate), a fourth-generation, broad spectrum injectable cephalosporin. Cefrom is available from hospitals in 1g vials (at a basic NHS price of five for £53.75) and 2g vials (five, £107.50).
Hoechst Roussel Ltd. Tel: 01895 834343.

Tylex Effervescent

Cilag has introduced Tylex Effervescent soluble tablets, containing 500mg paracetamol and 30mg codeine phosphate. They are available in packs of 90 with a basic NHS price of £8.53.
Janssen-Cilag Ltd. Tel: 01494 567567.

Buccastem change

The 60-tablet pack of Buccastem (prochlorperazine 3mg) is being replaced with a 50-pack with a basic NHS price of £5.75.
Reckitt & Colman Products. Tel: 01482 326151.

Naprosyn expands

Roche Products is introducing Naprosyn (naproxen) 240ml x 25mg/ml Suspension (£5.09) and 56 x 500mg Naprosyn LE tablets (£13.65). The company is moving its drug information department to Welwyn from July 10.
Roche Products Ltd. Tel: 01707 366000.

Lederle redistribution

Wyeth Laboratories is taking over distribution of Lederle Laboratories' products from July 3.
Lederle Laboratories. Tel: 01628 604377. Orders: 01628 414871.

Tridestra charges

Sanofi Winthrop's HRT product Tridestra attracts only two script charges, but three professional fees. For June, the PPA will process scripts as if three charges had been levied. If any pharmacists received information in time to levy only two charges for June scripts, they should apply to the FHSA for a refund.

Cicatrin deletion

Wellcome is to discontinue Cicatrin Aerosol. Pharmacists should retain stocks to cope with residual demand as the company will not accept packs for credit or replacement.
Wellcome UK. Tel: 0161 435 9000.

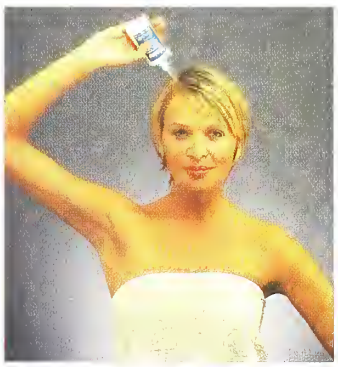
Betacap steroid scalp application

Dermal Laboratories has launched Betacap, a scalp application containing 0.1 per cent w/w betamethasone as valerate.

Betacap is indicated for adults and children over six for the treatment of scalp dermatoses, such as psoriasis and seborrhoeic dermatitis, unresponsive to less potent corticosteroids.

The transparent, slightly-gelled formulation also contains a coconut oil-derived emollient to reduce the drying effect of the antiseptic alcoholic base. The viscosity has been adjusted so that it spreads easily without being too fluid. Betacap comes in a 100ml original pack (basic NHS price £4.42).

The product should be applied sparingly to the scalp morning and night until the condition improves. A maintenance dose of once daily or less frequently is possible and treatment of seborrhoeic dermatitis in children should be restricted to five to seven days.



Product licence number: PL 0173/0149.
Dermal Laboratories Ltd. Tel: 01462 458866.

Warticon Cream for genital warts

Perstorp Pharma has launched Warticon Cream, a topical treatment for external genital warts containing 0.15 per cent w/w podophyllotoxin.

The prescription-only product is an addition to the existing Warticon Solution and is the only available cream formulation of the drug. The white homogeneous cream is thought to be easier to handle and apply than the solution, and doses can be more easily regulated.

The 5g tube has a basic NHS price of £17.40 and comes with a self-standing mirror.

The cream should be applied twice daily for three days followed by a four-day treatment-free period. If warts are still present after a week's application, the course should be repeated again. A maximum of four treatment courses should be applied, thereafter a doctor should be consulted.

Product licence number: PL 3863/0010.
Perstorp Pharma Ltd. Tel: 01256 477868.

MEDICAL MATTERS

Alcohol limits unchanged

The recommended safe limits for alcohol intake should remain at 21 units a week for men and 14 for women, doctors have agreed.

Although studies have shown that, among middle-aged men, moderate drinkers have a lower risk of coronary heart disease than non-drinkers, in younger men alcohol consumption is associated with a greater risk of death from suicide, accidents and violence.

A report published last week by the Royal Colleges of Physicians, Psychiatrists and General Practitioners warns that raising recommended limits would do more harm than good. Stressing the positive benefits of alcohol would be likely to increase drinking in the population as a whole which, in turn, would increase the number of people drinking in the high-risk categories (over 50 units a week for men, over 35 a week for women).

The Government is reviewing the current recommendations on sensible drinking and is thought to be under considerable pressure to relax the limits.

Finasteride halts benign prostatic hyperplasia progress

Finasteride has been found to significantly improve the symptoms, prostate volume and flow rate in benign prostatic hyperplasia (BPH), according to the Scandinavian BPH Study Group.

A two-year double-blind placebo-controlled trial of 707 men between 46-80 years old looked into the long-term efficacy and safety of a daily dose of finasteride 5mg (Proscar) in treating the moderate symptoms of BPH.

Patients on finasteride showed a significant improvement in symptoms over the two years. Those on placebo showed initial improvement, but symptoms returned to their original level. The average size of the prostate gland decreased by 19.2 per cent in the treated group, compared to an increase of 11.5 per cent with placebo.

New class of selective NSAIDs

A more selective class of non-steroidal anti-inflammatory drugs has been developed which avoids the associated gastro-intestinal side-effects.

The new NSAIDs work by selectively inhibiting the action of one isoform of cyclo-oxygenase enzyme, COX-2, which is believed to be responsible for the anti-inflammatory effects. But, unlike the older NSAIDs, they do not inhibit the cytoprotective role of COX-1, which usually leads to GI side-effects.

Boehringer Ingelheim is planning to launch the first of these new NSAIDs, meloxicam, early next year. Several other companies are developing other selective NSAIDs.

Professor Paul Emery, head of the Rheumatology and Rehabilitation Research Unit at Leeds University, believes that COX-2 inhibitors alone will not result in disease-modifying action against rheumatoid arthritis. However, in osteoarthritis and soft tissue injuries, there is more scope for symptomatic treatment.

PARACODOL®

WIN A NEW SUMMER WARDROBE WITH PARACODOL AND BURTON GROUP

PARACODOL is the answer for fast, effective pain relief.

Now Pharmacy Assistants can enter the **PARACODOL** "Win a Summer Wardrobe" competition and win one of 100 fantastic Burton's Group Gift Vouchers worth £50!

Ask your Roche representative for an Entry Form and Competition details.

Closing date for entries is August 31st 1995.

Pain can't hide from PARACODOL.

Roche

Roche Consumer Health

Please seek the permission of your employer before you enter. The winners will be selected for the Tiebreaker lines that reflect the best understanding of Paracodol. Only one entry per person. Prize winners will be notified in writing by September 15th 1995. Prize winners' details can be obtained by sending a stamped addressed envelope to Paracodol Competition, Roche Consumer Health, BDS, 1 Richmond Mews, London, W1V 5AG. No cash alternative.

MDS payment help on offer

Further to my recent article on monitored dosage systems, I have been encouraged to receive so many telephone calls and letters from community pharmacists from all parts of the UK – including pharmacists/managers from major multiples as well as independent pharmacists – who feel that, at last, there is light at the end of the tunnel!

Many pharmacists say they have approached the homes which they service after asking my advice and have found many of them willing to pay for the provision of a monitored dosage system. I urge all pharmacists who are providing an MDS free of charge at present to consider approaching their homes for payment for this service.

Do not be afraid to charge for your services; I am now receiving payment for the provision of an MDS from a large number of the homes we service.

If you would like any help or assistance, then please contact me at Ashtons Ltd. Tel: 01273 325020.

Laurence S Sprey
Brighton

DoH claws back if script numbers rise

I would like to comment on the statement of the Central Statistical Office published in *C&D* June 24.

If strong increases in sales of dispensed medicines were recorded, they are of no benefit to pharmacists. Any increases will no doubt be clawed back by the Department of Health in due course, as the global sum allocated will have been exceeded.

M Silver
London E1

More binding in PSNC Conference marsh ...

In reply to Mr Korsner's apparently hastily-constructed letter, (**Letters,** June 17) I believe it is he who is ill-informed. He asserts that St Helens & Knowsley Local Pharmaceutical Committee (and/or myself) is "apathetic and uninformed". Perhaps he would care to examine this LPC's record? We have been constructively critical of the Pharmaceutical Services Negotiating Committee for a number of years, and we are certainly not given to uninformed reasoning.

The recent conference was called for no other reason than that PSNC was presented with a request to call such a conference which had the requisite 24 or more LPC signatures on it. I am assured by PSNC that this is the case, and that it was not in response to any other resolution regarding offers from the Department of Health. PSNC was constitutionally bound to call a conference. Whether PSNC was ready or not to accept an offer was irrelevant, and Mr Korsner should be made aware that PSNC does not need to have acceptance of an offer ratified by a conference. Indeed, PSNC can act against conference wishes if deemed appropriate.

It is an arrogant and, indeed, dangerous assumption that the DoH increased the offer terms purely because a conference was imminent. There is no reason to doubt that an increased offer was on the way, and the timing of its arrival was coincidental. If, as Mr Korsner seems to think, calling a conference precipitates an increased offer from the DoH, then no doubt he would call even more conferences, and waste even more of contractors' money!

The £20,000 "investment" was not an investment at all. All this conference did was provide a platform for publicity-conscious pharmacists to practice their public speaking.

The reason our negotiators don't have the negotiating muscle of, for example, the medical profession is that retail pharmacy does not have any weapon to hold to the DoH's head. Forget the BMA, Mr Korsner – the minister has stated categorically that comparison of pharmacy with allied professions is useless.

If Messrs Donoghue, Clitherow, Korsner *et al* wish to form a negotiating splinter group, then good luck to them. They will lead this profession into a 'divide and rule' situation which can only strengthen the DoH's position.

Finally, if Mr Korsner thinks any or all of St Helens LPC belong to the "give-in gracefully" brigade, then he is sadly mistaken. We are funded, both LPC and PSNC alike, by local contractors, and we are not prepared to waste their hard-earned money on unproductive trips to London.

M Mansour
St Helens & Knowsley LPC

... as representative gets bogged down

As a new member of the Pharmaceutical Services Negotiating Committee, I was amazed to read the letter of support for John Donoghue from Adrian Korsner with regard to the special LPC Conference. The action of Mr Donoghue in calling a special conference can only be regarded as a vote of no confidence in PSNC.

Perhaps Mr Korsner can explain why, if Mr Donoghue is so interested in pharmacy remuneration, Liverpool LPC does not invite Steven Williams, their PSNC representative, to the LPC meetings.

The PSNC representative would then have explained the remuneration negotiations to the LPC as they progressed on a monthly basis. I believe Liverpool contractors have been done a disservice by Mr Donoghue who seems to have his own political agenda.

It is interesting to note that, in my area, the only LPC which voted for a special conference is the LPC which does not invite me to its meetings, and whose secretary appears to insist that PSNC is a finished force.

Tony Allen
SW representative, PSNC

Product Information. Nurofen Plus:

Each tablet contains Ibuprofen BP 200mg and codeine phosphate BP 12.5mg.

Indications: Effective in the relief of migraine, headaches, neuralgia, dental pain, dysmenorrhoea, rheumatic and muscular pain, backache, feverishness, symptoms of colds and influenza.

Dosage and Administration: Adults and children over 12 years: Initial dose 2 tablets taken with water, then if necessary 1 or 2 tablets every 4-6 hours. Do not exceed 6 tablets in 24 hours.

Precautions and Warnings: As with some other pain relievers, Nurofen Plus should not be taken by patients with a stomach ulcer or other stomach disorder or hypersensitivity to ibuprofen or codeine. Patients receiving regular medication, asthmatics, anyone allergic to aspirin, and pregnant women should be advised to consult their doctor before taking Nurofen Plus. In normal use, side effects are very rare, but may occasionally include dyspepsia, gastrointestinal intolerance and bleeding, constipation, nausea and skin rashes. Not recommended for children under 12. If symptoms persist for more than 7 days, patients should be advised to consult their doctor.

Product Licence Number: 0327/0082.

Licence Holder: Crookes Healthcare Limited, Nottingham, NG2 3AA. Legal Category: P.

Price: Nurofen Plus 12's £1.85, 24's £3.39.

Date: June 1995.

Reference: 1. Busson, M., J. Int. Med. Res. 1986, 14, 53.

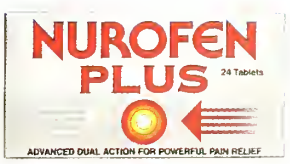
NUROFEN PLUS

Contains ibuprofen & codein

'TAKE NUROFEN PLUS'

By adding the power of codeine to the proven efficacy and tolerability of ibuprofen[1], Nurofen Plus gives you an ideal recommendation for migraine, tension headaches and other indications requiring fast, extra-strength pain relief.

WHATEVER THE PAIN, YOU'VE GOT A NUROFEN ANSWER



Therapeutic niche marketing is the new buzz word for American community pharmacists, who see it as the best way of combating the inroads made on them by retail competitors. Anthony de Nicola explains ...

A new approach to OTC profits

The inevitable and continuing squeeze on profits in the prescription department has lead pharmacists in all retail practice settings in America to seek out new and innovative ways to earn profits on their front of shop sales.

The traditional profit centres of the independent pharmacy – prescriptions and the sale of OTC medicines, toiletries and beauty care items – have been significantly eroded by the growth of third-party prescription programmes and aggressive (some say predatory) retail competition.

Mass merchants, like Walmart and K-Mart, chain drugstores and food markets have captured the lion's share of the 'traditional' front of shop sales, formerly dominated by independents.

LATEST CONCEPT

These trends have lead independents in the States to look for new ways to earn sales and profits from the front of shop. The latest concept, currently being more and more widely used every day, is 'therapeutic niche marketing'.

In these programmes, pharmacists are addressing specific market niches and gearing their front of shop selling and marketing activities to a segment or segments of their customer base and/or catchment area. By doing this, they can accurately allocate both inventory and merchandising space.

The primary type of activity being pursued at this time is in the area of diabetes care. With more than 6 per cent of the American population suffering from diabetes (over 15 million people), there is ample opportunity for independent pharmacists in most, if not all, trading areas to set up a diabetes care practice.

The steps involved include:

- setting aside a dedicated area within the pharmacy for the display of diabetes care products
- advertising and marketing the presence of the department to the community
- interacting with other healthcare professionals and referral sources to make them aware of the products and services the pharmacy provides
- educating and training the entire staff as to the importance of these activities
- holding 'special events' which call attention to this particular department in the pharmacy.

Independent pharmacists who are involved in these activities are finding them most rewarding, financially as well as professionally. They find that they can then spin off into other therapeutic areas, including:

- hypertension
- ostomy care
- hyperlipidemia
- women's health
- cardiac care.

All of these therapeutic conditions require particular attention and a special knowledge base, which can be provided by pharmacists and their staffs.

SPIN-OFFS

Therapeutic niche marketing has enabled US pharmacists to better understand the overall concept of micro-marketing. The activity has now spun off into other areas, where pharmacists address demographic niches, in addition to the therapeutic ones which may exist in their communities.

Some of these include:

- senior citizens
- teenagers
- young mothers
- working singles
- specific ethnic groups.

An in-depth knowledge of the catchment area from the standpoint of age, income, housing and all the other factors which make up a marketplace can assist pharmacists in better targeting their customers, thereby providing the products and services they need and want – the ultimate goal of the marketing function.

In this era of greater and greater specialisation; it is important that independent pharmacists in the States capitalise on their strengths when marketing their services to the community.

Without the 'corporate muscle' of their competitors, independents must assess their strengths, including convenient neighbourhood locations, personalised service and relationships with other members of the healthcare team, and utilise what they 'bring to the party' for patients, consumers and third-party payers.

Therapeutic niche marketing has become, and will continue to be, an important avenue which independents can dominate, if they so choose. The only barrier to that will be the unwillingness or inability of independent shop owners to take the proactive steps necessary to capitalise on this opportunity.

Anthony de Nicola is a pharmacist and president of pharmacy consultant A&D Associates. He has had 25 years' experience in community pharmacy, owning two outlets in suburban New York. He founded and directed the Legend Pharmacy Co-operative, a network of 850 community pharmacies in 15 US states for 13 years.

PHARMACY update

Hepatitis
Current thinking on the different causes of hepatitis *I*

Diagnostic screening
A summary of the many screening services the pharmacist can offer *IV*

Head lice and audit
Auditing sales and prescriptions of head lice products *VII*

The many faces of hepatitis

Improved technology has made it clear that hepatitis has a variety of causes. Prime among these is an ever-growing range of viruses. Fiona Raeside, nurse epidemiologist at the Scottish Centre for Infection and Environmental Health, discusses current thinking on the disease's viral origin, prophylaxis, treatment and the possibility of further viral discoveries

Hepatitis may be caused by numerous different agents, including alcohol, drugs, immunological disorders and infection. However, viruses are the main cause of the disease. Five hepatitis viruses are currently recognised, classified A-E (see table on PII).

Sensitive and reliable diagnostic tests are available for all of them, except hepatitis E.

The illness

The illness seen in most forms of viral hepatitis is similar, irrespective of which virus is responsible, and results from acute inflammation of the liver.

Initial symptoms may include anorexia, nausea, vomiting and general malaise. These symptoms are usually made worse by the smell of food or tobacco smoke.

Jaundice, a yellowing of the skin and whites of eyes as a consequence of bile pigments in the blood, may develop a few days later, along with the passage of light-coloured stools and dark urine. The illness typically lasts about two to three weeks.

In many individuals the infection is asymptomatic and may pass unnoticed. In others, illness, including jaundice, may be present, and if severe and prolonged, can result in liver failure, coma and death.

Chronic hepatitis is sometimes seen as a complication of infection with hepatitis B or C virus, and can lead to more serious long-term effects.

Treatment

There is no specific treatment for acute hepatitis, apart from rest and adequate fluids. Hepatotoxic agents, like alcohol, paracetamol and oral contraceptives, should be avoided.

Most individuals can remain at home under the care of their general practitioner. Hospital referral is only required if the illness is severe or fails to resolve quickly. In cases where liver failure is a complication, treatment is supportive until liver function recovers.

In the cases of chronic hepatitis, treatment with alpha-interferon may reduce or eliminate inflammation in the liver and prevent the progression to cirrhosis. Hepatocellular carcinoma may develop in a small number of individuals with cirrhosis, but if recognised early, it can sometimes be cured by surgery or chemotherapy. In severe cases of cirrhosis, liver transplant may be considered, although this is rarely successful.

Hepatitis A

Incidence

Hepatitis A infection occurs worldwide. In the UK, the average annual number of laboratory confirmed cases during the ten years 1984-1993 exceeded 5,000[1,2].

Spread

HAV is principally transmitted via the faecal-oral route, either through ingestion of contaminated food or water, or from person to person. Foodstuffs may become contaminated by handlers who are excreting virus, and

Garry Watson/Science Photo Library

A patient with jaundice, a common hepatitis symptom

Continued on PII ▶

HEPATITIS VIRUSES

	A	B	C	D	E
Virus type (genome)	Enterovirus type 72 (RNA)	Hepadnovirus (DNA)	Possibly flavivirus (RNA)	Defective (RNA)	Possibly calcivirus (RNA)
Incubation period	Two to six weeks	Six to 24 weeks	Two to 24 weeks	Possibly two to ten weeks	Two to eight weeks
Main routes of spread	Faecal-oral	Parenteral, sexual mother-to-child	Parenteral	Parenteral	Faecal-oral
Main risk groups	Travellers, children	IV drug abusers, sexually promiscuous, infants of carriers	Blood recipients IV drug abusers	IV drug abusers	Travellers, young young adults

Continued from P1

water polluted by infected sewage. Shellfish and seafood are frequently implicated in outbreaks, but virtually all uncooked food and drink carry the potential for infection.

Hepatitis A infection is especially prevalent in the tropics, where vegetables and fruit are often fertilised with human faeces (night soil) and poor sanitation and hygiene prevail. Person to person spread is common in children, and schools provide an opportune site for outbreaks.

Groups who may be at increased risk of infection with HAV include:
– travellers to countries outside Northern and Western Europe, North America, Australia and New Zealand
– sewage workers
– residents and staff of institutions for the mentally handicapped
– children and staff of daycare centres, nurseries and other settings where children are not fully toilet-trained
– homosexual males
– drug abusers.

Outcome

Individuals with hepatitis A usually recover within several weeks, although around 0.1 per cent of jaundiced cases may die as a result of acute liver failure.

Infection with HAV is generally milder than with hepatitis B virus (HBV), it rarely causes chronic liver damage and there is no carrier state. Following infection, antibodies develop, providing life-long immunity. In fact, many adults in the UK are immune to hepatitis A, particularly if aged over 50 and in one of the lower social classes.

Prevention

Spread of hepatitis A is reduced effectively by having good sanitation and waste disposal systems, and by promoting strict personal hygiene. Travellers should avoid raw or inadequately cooked shellfish, raw vegetables, untreated drinking water and unpasteurised milk.

Immunisation against hepatitis A is available and should be considered for travellers to areas of moderate or high endemicity, and sewage works. Immunisation may be useful for other groups in the light of local circumstances.

Hepatitis A immunoglobulin (HNIG) has been used for many years and is effective in protecting travellers to endemic areas. Unfortunately, HNIG can only offer short-lived, passive protection of between two to six months, depending on the dose administered.

More recently there has been keen interest in the development of hepatitis A vaccines. An inactivated vaccine, stable when stored between 2-8°C, is available in the UK from Smithkline Beecham. Generally, the vaccine is well tolerated, with few side-effects. Very occasionally, recipients report fever, malaise, fatigue and headaches, with transient soreness, erythema and induration at the injection site.

For the future, attenuated strains of the virus are under trial and may be useful in the development of live vaccines, which are cheaper and easier to administer on a large scale.

Hepatitis B

Incidence

HBV causes about 200 million deaths worldwide per year - far more than HIV. The annual number of cases reported in the UK has declined in recent years, from around 3,000 in 1984 to under 1,000 in 1993[1,2]. However, as with hepatitis A, the actual numbers of cases are significantly under-reported.

Prevalence of hepatitis B infection abroad is generally higher than in the UK, particularly in parts of Africa and Asia.

Spread

HBV has been isolated from blood, semen, vaginal fluid, saliva and tears. The main routes of transmission of the virus are parenterally, sexually and from mother to child. Transfusion of blood or blood products, the use of contaminated syringes or needles, tattooing, ear-piercing or acupuncture equipment, medical instruments or even sharing a razor have been implicated.

HBV is easily acquired sexually in the UK, particularly among individuals who frequently change sexual partners. Having unprotected sex abroad, in countries with a high prevalence of hepatitis B (such as Thailand, the Gambia, India and the Mediterranean), poses a very real risk of infection.

Mother-to-child transmission of HBV can occur transplacentally *in utero*, during delivery or postnatally. The infection can also be transmitted via breastfeeding, and babies born to infected mothers should be immunised.

Individuals at increased risk of infection with HBV include:
– intravenous drug abusers
– sexually promiscuous and homosexual groups
– infants born to infected mothers
– long-stay travellers to high-prevalence areas – healthcare personnel
– haemophiliacs and renal dialysis patients
– clients and staff of residential institutions for the mentally handicapped.

Outcome

Of those individuals infected with acute hepatitis B, fewer than 1 per cent die of liver failure and more than 90 per cent recover completely. Up to 10 per cent of adults and 75 per cent of neonates who acquire hepatitis B infection become carriers, remaining infectious to others and at risk of long-term sequalae – chronic hepatitis and hepatocellular carcinoma.

The carrier state usually results from asymptomatic infection without jaundice. It can persist for many years, but is not usually life-long, except after neonatally-acquired infections. In Britain, the prevalence of carriers is about 0.1 per cent, whereas in parts of Africa and Asia it may approach 20 per cent.

While there is no specific treatment for acute hepatitis B, chronic carriers have been treated with several antiviral agents. The most successful of these has been alpha-interferon, which can eradicate HBV from the liver in up to 50 per cent of cases.

Prevention

Prevention of infection with HBV relies on avoidance of risk behaviour and immunisation of at-risk groups. There are two types of immunisation available – hepatitis immunoglobulin (HBIG) and hepatitis B vaccine. HBIG is used to confer passive immunity after known exposure and is normally used in combination with hepatitis B vaccine. A single dose of HBIG should be given within 48 hours, if possible, and no later than one week after exposure.

Two makes of hepatitis B vaccine are currently available in the UK – Engerix B (Smithkline Beecham) and H-B-Vax (Pasteur Merieux MSD). About one to two months following vaccination, blood should be checked for the presence of adequate protective antibody levels.

This allow an estimate to be made of when boosters are due, six months to five years later. Around 90 per cent of individuals will demonstrate adequate levels of antibody after vaccination, while 10 per cent may require booster doses or re-vaccination.

Hepatitis C

Incidence

Hepatitis C virus (HCV) is probably responsible for most parenterally-transmitted hepatitis that is neither A nor B. The virus was identified in 1989, and studies of blood donors in the UK indicate that as many as 1 in 100 donors may have antibody to HCV.

Spread

The main route of spread is parenterally, through infected blood or blood products, or contaminated needles and syringes. Person to person contact and sexual activity appear to be a less important means of spread of HCV.

Continued on PIII

Continued from PII

Groups at highest risk include blood transfusion recipients, haemophiliacs and drug abusers.

Outcome

Of those individuals infected with hepatitis C, about half fully recover, while the remainder may suffer persistent infection, with or without symptoms. The use of alpha-interferon in the treatment of hepatitis C has been shown to alleviate chronic infection in about 40 per cent of cases. However, the improvement is not always sustained and in some individuals the liver inflammation returns after treatment is stopped.

Prevention

There is no vaccine currently available to protect against hepatitis C. Prevention of infection depends on the avoidance of risk behaviour, including needle sharing and unsafe sex.

Hepatitis D

Incidence

Hepatitis D virus (HDV), also known as the delta agent, is only found in individuals infected with hepatitis B. Delta infection has been described worldwide, although it is particularly common in southern Europe, especially Italy. Its distribution tends to follow the prevalence of HBV.

Spread

Transmission is predominantly associated with blood to blood contact. There is apparently little sexual or mother-to-child transmission of HDV. High-risk groups within the UK include IV drug abusers and those who have had multiple transfusions.

Outcome

Individuals with delta infection and acute hepatitis B tend to suffer a more severe illness than those with hepatitis B alone. Long-term effects, including cirrhosis and liver failure, appear to occur more commonly in hepatitis B carriers when co-infected with delta agent. The role of antiviral agents and interferon in the treatment of chronic delta infection is under study, but the response is poor.

Prevention

Since HDV can only co-exist with hepatitis B, prevention of hepatitis B transmission or immunisation against hepatitis B can effectively control the spread of delta hepatitis.

Hepatitis E

Incidence

Very little is known about the virology of hepatitis E, and at present there is no accurate diagnostic test What is known is that there is a form of hepatitis, other than hepatitis A, which causes epidemics of waterborne disease.

In the tropics, probably more than half of all acute viral hepatitis cases are caused by hepatitis E virus (HEV). The disease is not common in Britain, and most cases appear to be related to travel to endemic areas.

Spread

HEV is transmitted via the faecal-oral route, like hepatitis A. Contaminated water is the most common source of infection, although person to person spread may play a part. Major waterborne epidemics have been reported from the developing world.

In Britain, hepatitis E tends to affect young to middle-aged adults (15-40 years old) who have travelled to tropical countries.

Outcome

The course of hepatitis E infection is similar to that of hepatitis A. However, there is an extremely high mortality rate in pregnant women infected with HEV, approaching 20 per cent in most reported epidemics. Long -term sequelae do not seem to occur.

Prevention

Since there is no vaccine available against hepatitis E, prevention relies on maintaining good standards of hygiene, particularly among travellers to endemic areas. Hepatitis A immunoglobulin, manufactured in the UK or Europe, is unlikely to protect travellers against infection with hepatitis E.

More to follow?

Is the presence of hepatitis F, G, and so forth, a possibility? Certainly, three new viruses have now been discovered in blood samples of an American doctor who contracted the disease in 1964: GBV-A, GBV-B and GBV-C. These, like hepatitis C, are members of the flavivirus family.

Hopefully, future research will also lead to the development of effective vaccines and successful treatments to combat a disease which has such a major impact on health worldwide.

Figures supplied by:

1. Scottish Centre for Infection and Environmental Health, Glasgow, Scotland
2. Public Health Laboratory Service CDSC, London, England

DISPLAY AND WIN WITH ZANTAC 75

You may already have won one of the following prizes! A weekend in Paris for two, 14 nights for two in Egypt or 12 nights in the Seychelles.

All you have to do is compare the half bank note attached to your Zantac 75 Counter Unit, Open and Closed sign or Window Display, with the half bank notes printed every month only in *Chemist & Druggist*.

If you can match the serial numbers then you've won a fabulous prize! Call the Warner Wellcome Hotline on 0500 878 889 to claim your holiday.

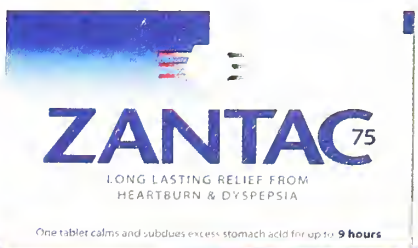
ONE MORE CHANCE TO WIN!

Take a look at *Chemist & Druggist* at the beginning of next month, where the final bank notes will be appearing.

Several of your colleagues have already enjoyed their super prize holidays. You could be next! For your last chance to win, look out for more winning numbers in next month's first edition of *Chemist & Druggist*.

Remember, it pays to display with Zantac 75.

FROM A WORLD OF EXPERIENCE



A WHOLE NEW WORLD OF RELIEF OT

Diagnostic testing

Pharmacists can monitor the healthcare of their patients in a number of ways. Community pharmacist Dr Steven Kayne offers a guide to the range of health screening services the profession can offer

Perhaps the greatest opportunity for a pharmacy to distinguish itself from the competition, and for individual pharmacists to distinguish themselves in community environments, is in the area of service provision.

The types of services offered, and the manner in which they are made available to the public, are critical to an effective participation in the total pharmaceutical care package being widely advocated within the profession. It has been shown that personal service is a major factor in maintaining customer loyalty.

A growing public awareness of the importance of health screening in preventing disease, and the development of compact, accurate apparatus, has made testing far more attractive to the community pharmacist.

Range of services

We have come a long way since the familiar weighing machine was manhandled into the shop doorway just before closing time each night and chained to the wall. People weighed themselves, their children and even the family dog. This was superseded by a new, shiny plastic model that provided a record of your weight on a print-out – and cost the user three times as much.

Modern coin-operated machines (eg the Vandoni V10 from Anglo European Health) have video displays and can even generate an 'ideal' weight by keying in details of height, sex and build.

Pregnancy testing was once the preserve of the doctor's surgery or the family planning clinic. When the service became available in the pharmacy there was much ethical discussion. Nowadays, almost all pharmacies sell pregnancy testing kits, and more than two-thirds offer testing over the counter for women who do not want to handle urine and test reagents themselves. An accurate result can usually be provided within two to five minutes, using a monoclonal test.

It is claimed by some manufacturers that their tests will detect sufficient amounts of the hormone human chorionic gonadotrophin (HCG) in a urine sample even on the day of a missed period. In practice, a time-lag of around two weeks is normally recommended, not only to improve accuracy but because almost half of all pregnancies spontaneously abort during the early days even before a period is two weeks overdue. Such a natural 'miscarriage' appears as a late heavy period.

Women should be advised to provide an early morning urine sample in a clean bottle, especially if it is early into the pregnancy. If kept for more than four hours before testing, the sample should be refrigerated and allowed to reach room temperature again before use.

Some fertility drugs may interact with HCG tests to give false positive results. Oral contraceptives should not affect the result, but if a woman has recently stopped taking the pill, her periods may be irregular and she should be encouraged to wait the full two weeks after suspected conception.

There are said to be four different results of a pregnancy test as far as the customer is concerned:

- pregnant and happy
- pregnant and unhappy
- not pregnant and happy
- not pregnant and unhappy.

The pharmacist should be able to counsel appropriately in each of these situations. A positive test provides a good opportunity to offer advice on diet and medication during the first trimester. Under some circumstances, a negative test may be just the time to talk about contraception.

Under pressure

About 15 per cent of British pharmacists offer a blood pressure monitoring service. The traditional method of measuring blood pressure involves the use of a mercury sphygmomanometer, comprising an inflatable bladder in a cuff, a column of mercury and an inflation/deflation device. The Royal Pharmaceutical Society recommends training before such an apparatus is used on clients.

Electronic and digital versions giving read-outs are now available, together with

Continued on PIV ▶

Picture courtesy of Reflotron 2000 courtesy of Boehringer Mannheim

Phamacist offering cholesterol testing

Dispense the One that's Number One

Rosemont's Methadone Oral Solution is an effective and well regarded aid to opioid addiction treatment.

In fact, it became the UK's leading methadone formulation[1] just six weeks after its introduction - perhaps not surprising since we're an independent supplier, specialising in oral liquid formulations.

Its pleasantly familiar colour and taste assure patient compliance, while its 1mg/ml methadone hydrochloride BP concentration gives full-strength relief from narcotic abstinence syndrome.

Our Methadone Oral Solution is an approved DT Formulation, so it can fulfil all prescriptions for Oral Methadone and Methadone Mixture in the treatment of opioid drug addiction.

Normally available in handy 500ml packs, Rosemont Methadone Oral Solution can be ordered in a range of smaller sizes on request.

For a full fact sheet please write to us at the address below - **And put the information behind the solution in your hands.**

Available at Unichem, AAH (Hillcross) Numark and selected wholesalers.

ROSEMONT

METHADONE ORAL
SOLUTION DTF 1mg/1ml

1. Sales to retail pharmacies March 1995

FULL DTF REIMBURSEMENT

Rosemont Pharmaceuticals Ltd.,
Rosemont House, Yorkdale Industrial Park, Braithwaite Street, Leeds LS11 9XE
Telephone: (0113) 244 1400 Sales/Customer Service: (0113) 244 1999 Fax: (0113) 246 0738

Presentation: A green solution. Each 1ml contains 1mg Methadone Hydrochloride BP. The product is preserved with Methyl and Propyl Hydroxybenzoate esters and is coloured with E102, E142 and E110. **Uses:** In the treatment of opioid drug addiction (as a narcotic abstinence syndrome suppressant). **Dosage and Administration:** For oral administration only. Adults: Initially 10-20mg per day, increasing by 10-20mg per day until there are no signs of withdrawal or intoxication. The usual dose is 40-60mg per day. The dose is adjusted according to the degree of dependence with the aim of gradual reduction. Elderly: In the case of the elderly or ill patients repeated doses should only be given with extreme caution. Children: Not recommended for children. **Contra-indications and Warnings:** Contra-indications: Hypersensitivity to hydroxybenzoate esters. Respiratory depression, obstructive airways disease, concurrent administration with MAO inhibitors or within 2 weeks of discontinuation of treatment with them. Use during an acute asthma attack is not advisable. Use during labour is not recommended, the prolonged duration of action increases the risk of neonatal depression. Methadone is not suitable for children. **Drug Interactions:** Alcohol: May induce serious respiratory depression and hypotension. Cimetidine or Phenytoin: potentiation of opiate action due to displacement of Methadone from protein binding sites. Rifampicin, reduced opiate effect due to increased metabolism. MAOIs: Possible CNS excitation or depression. Urinary acidifiers: Increases rate of excretion of drug thus decreasing plasma concentrations. CNS Depressants: Major and minor tranquillisers, sedatives and tricyclic antidepressants may result in increased CNS depression, respiratory depression and hypotension. Opioid Agonist Analgesics: Additive CNS depression, respiratory depression and hypotension. Naloxone: Antagonises the analgesic, CNS and respiratory depressant effects of Methadone. Naltrexone or Buprenorphine/Pentazocine: Administration to a patient addicted to Methadone may precipitate withdrawal symptoms. **Effects on Ability to Drive or to Use Machines:** This may be severely affected during and after treatment with Methadone. The time after which such activities may be safely resumed is extremely patient dependent and must be decided by the Physician. **Undesirable Effects:** Methadone has the potential to increase intracranial pressure, particularly in circumstances where it is already raised. **Use in Pregnancy and Lactation:** There is no, or inadequate, evidence of safety in human pregnancy, but the drug has been widely used for many years without apparent ill consequence and animal studies have not shown any hazard. It should not be used during labour, see 'Contra-indications'. Methadone is excreted in breast milk. This may be perceptible during maintenance dosage. **Other Special Warnings and Precautions:** In the case of elderly or ill patients, repeated doses should only be given with extreme caution. Methadone is a drug of addiction and is controlled under the misuse of Drugs Act 1971 (schedule 2). **Overdose: Symptoms:** Serious overdosage is characterised by respiratory depression, extreme somnolence progressing to stupor or coma, maximally constricted pupils, skeletal muscle flaccidity, cold and clammy skin and sometimes bradycardia and hypotension. In severe overdosage, particularly by the intravenous route, apnoea, circulatory collapse, cardiac arrest and death may occur. **Treatment:** A patent airway and assisted or controlled ventilation must be assured. Narcotic antagonists may be required, but it should be remembered that Methadone is a long acting depressant 36-48 hours, whereas antagonists act for one to three hours, so that the treatment with the latter must be repeated as needed. An antagonist should not be administered, however in the absence of clinically significant respiratory or cardiovascular depression. Nalorphine 0.1mg per Kg or Levallorphan 0.02mg per Kg should be given intravenously as soon as possible and repeated, if necessary, every 15 minutes. Oxygen, intravenous fluids, vasopressors and other supportive measures should be employed as indicated. In a person physically dependant on narcotics, administration of the usual dose of a narcotic antagonist will precipitate an acute withdrawal syndrome; use of the antagonist in such a person should be avoided if possible but if it must be used to treat serious respiratory depression it should be administered with great care. **Incompatibilities:** No major incompatibilities known. **Pharmaceutical Precautions:** keep out of the reach of children, below 25°C protected from light. **Legal Category:** CD schedule 2 POM. **Package Quantities:** Amber type III glass bottles containing 500ml. **PL No:** 0427/0086 **Product Licence Holder:** Rosemont Pharmaceuticals Ltd. Rosemont House, Yorkdale Industrial Park, Braithwaite Street, Leeds LS11 9XE. **Date of Preparation:** April 1995. **Basic NHS Price:** 500ml - £7.59

Continued on PVI

semi-automatic machines that only require the application of a cuff by the operator.

Blood pressure is not constant; it varies with exercise, strong emotions and stress. The British Hypertension Society recommends that blood pressure should be measured twice on each occasion and that elevated readings should be observed by GPs for one to six months, depending upon the initial measurement.

Normal adult blood pressure has been defined as a systolic pressure of 140mm Hg or less, with a diastolic pressure of 90mm HG or less. The Society publishes guidelines for diastolic pressure above which medical referral is recommended. This ranges from 90mm Hg at age 30-40 to 110mm Hg above age 70. However, blood pressure can vary widely.

Primary or essential hypertension affects about 90 per cent of people with high blood pressure. The specific cause is unknown, but could be the result of several lifestyle factors, including lack of exercise, smoking or alcohol consumption and unhealthy diet. The pharmacist can counsel on a number of preventative measures.

Cholesterol testing

It is well known that increased levels of blood cholesterol are associated with increased risk of coronary heart disease. As long ago as 1989, it was found that pharmacy cholesterol testing was feasible and that there was likely to be a high demand for the service. Progress in installing the necessary equipment in community pharmacies has been slower than expected due to the relatively high investment required (£500-£1,000 plus) in providing equipment and facilities.

However, now that quick automated tests, involving just a pin prick of blood, are available, interest has increased. For example, the Acutrend GC (Boehringer) costing around £199 plus VAT for a kit, is a small hand-held unit that uses a finger tip sample and gives a blood glucose reading in 12 seconds and a cholesterol reading within three minutes.

If a cholesterol service is provided, RPSGB guidelines require you to use an area separate from the dispensary and away from where food and drink are consumed. A reading of 5.2-6.5mmol/L is within normal limits; above this level the patient should be counselled on their lifestyle and referred to their GP. Cholesterol testing home kits are also available.

Other options

Screening for undiagnosed diabetes is a role for which the pharmacist is ideally suited. One of the main areas of involvement is the provision of a blood analysis service and the sale of blood glucose meters for home use.

Most of the meters on the market have a digital display, require a single drop of blood and can store a minimum of ten results in their memories for later comparison. The Glucometer 4 (Bayer) costs around £35 and uses a glucotide strip, obviating the necessity of transferring blood samples.

Urinalysis can be performed quickly, easily and conveniently in the pharmacy. For example, the Multistix GP Diagnostic reagent strip (Bayer) can perform eight different tests on one urine sample – a hospital variant has ten different tests.

The test may be in response to a request from a patient's GP or direct from the patient. It is important that the samples are fresh to obtain the best reading, and that the container used is clean and dry to minimise the risk of bacterial or chemical contamination.

Examples of the results that can be obtained are the presence of the following:

- glucose and ketones indicating possibility of diabetes
- blood, leucocytes and nitrites could be due to urinary tract infection.

Another possible pharmacy test is peak flow measurement, useful in the management of asthma. Several peak flow meters are available, including the Mini-Wright, Vitalograph and Ferraris.

Alcohol breath tests are usually sold OTC, but on more than one occasion inebriated customers have staggered into my pharmacy after a local wedding reception asking if they were fit to drive!

Getting started

Before you embark on installing any of the above services in your pharmacy, you should consider the following points.

Training

It is essential that you are competent in any of the procedures outlined above, otherwise you are likely to lack confidence, and this will be transmitted to the patient. The Society's guidelines state that pharmacists and other staff involved in diagnostic testing and screening must be adequately trained in the procedures to be followed and the counselling required.

Pharmacists should undertake any training offered by the equipment manufacturers and be aware of the circumstances under which clients should be referred to their GP.

Before setting up a service, you should ensure that demand is likely to be sufficient to recoup the investment. A busy High Street pharmacy might offer a walk-in service, while in other, quieter areas an appointment service might be more appropriate .

Facilities

The procedures should be designed to reflect a professional approach. Ideally, an appropriate room or screened-off area should be available with supplies of leaflets. Counselling should reflect current thinking and therefore requires the pharmacist to ensure that he or she keeps up to date.

Charges

Charges for diagnostic and screening services should be based on the time spent with the client (and this could be considerable), reagent and equipment costs, quality control expenses and overheads. Some pharmacists have initiated a sliding scale of charges for cholesterol testing to take account of a longer consultation time on the first visit. As a guide, you might charge between £7 and £10 per test.

Quality control

The Society's guidelines for body fluid testing recommend that an appropriate internal and external quality assurance system is followed to ensure accuracy. A clinical biochemist in your local district health authority might be able to help in this regard. There is also a national assurance scheme operated by the Wolfson Research Laboratory in Birmingham.

Safety procedures

It is advisable that all staff involved in handling blood samples or blood-contaminated material are vaccinated against hepatitis B and wear latex gloves. The COSHH regulations require that an assessment is made of the risk to health of handling samples and a protocol should exist for dealing with spillages.

Preventing hypertension

- **Increase exercise levels**
- **Stop smoking**
- **Utilise stress management**
- **Follow a healthy diet**

Co-operation with other health professionals

The pharmacist is an important link in the healthcare team and a dialogue should be maintained with NHS colleagues.

Advertising

As screening and diagnostic testing are professional services, advertising should follow the appropriate section in the Code of Ethics. Posters may be placed in the pharmacy window and leaflets left on the counter. The wording of newspaper advertisements should be checked carefully.

More information

Although most screening services are currently being offered direct to the patient, it may not be too long before community pharmacists are routinely asked to carry out diagnostic testing by fundholding GPs, who are being encouraged to shop around for better value for their money.

If you are not yet involved, this could be a good time to consider it. The National Pharmaceutical Association can supply members with a number of leaflets and articles to help get started.

It is also possible to use one of the efficient laboratories around the country and not handle any of the testing yourself. Samples can be sent away by post and results communicated back electronically.

The future

The potential scope for diagnostic testing is increasing by the month. Faecal occult blood testing is very popular in America as a method of identifying the early stages of bowel cancer. There are numerous urine tests to obtain a client's health profile. For women, a tampon is being developed that can detect cervical cancer. Tests for fertility are already on the market, as are home AIDS testing kits.

It is possible that, in the future, blood sampling and needles may be made redundant by infrared sensing technology. These tests will measure cholesterol and blood glucose without breaking the skin, making diagnostic testing easier.

Using your head

Health promotion is something pharmacists do every day, but may consider it a difficult arena to audit. To coincide with Northern Ireland's new rotational headlice product policy, Deirdre Tunney, audit facilitator at the Pharmaceutical Society of Northern Ireland, looks at how the audit challenge can help the pharmacist, and GP, remain aware of the importance of local head lice policies

Table 1: health promotion checklist

Structure: facilities, resources, training, equipment
Answer yes/no
- Is there a designated area for health promotion?
- Is there a display stand?
- Is there a window display?
- Is there a supply of up to date leaflets?
- Have the staff been trained in communication?

Process: what activities is the pharmacy involved in?
Answer yes/no
- Are the displays regularly tidied and updated?
- Does the pharmacy actively support health promotion campaigns?

a) Locally?
b) Nationally?

- Are leaflets given out to reinforce advice?
- Is information displayed about local self-help groups?

Output measures
- Leaflet turnover
- Sales of products related to health promotion activity
- Requests for advice

Mr Jones owns a community pharmacy in a parade of shops in a city suburb. There is a doctor's surgery across the street and a dentist's around the corner.

The area is mainly residential, with a school and a nursery in the next street. The population is predominantly elderly and families. The shop is a busy one, with a good dispensing, and a growing OTC business.

Audit

When professional audit was introduced into community pharmacy, Mr Jones decided to look critically at all aspects of his health promotion service. He compiled a checklist of facilities and resources needed, and activities involved in health promotion. He also identified some output measures that could be used to monitor effectiveness. His checklist is shown in Table 1.

When Mr Jones audited his health promotion service, he became aware of topics of particular relevance to his customers. He decided to carry out an audit to monitor the adherence of the pharmacy and local GPs to the health district's headlice policy.

Headlice policies

The beginning of new school terms always brings anxious parents into the pharmacy enquiring about treatment and prevention of headlice. The subject, although common, is a sensitive one and parents may feel ashamed and embarrassed about seeking advice if their child has the condition.

Mr Jones is aware of the problems associated with incorrect and inappropriate use of pediculicide products, resulting in treatment failures, and the emergence of resistant strains of headlice. In order to control resistance to pediculicides, health districts have developed policies to address this problem.

There are three pediculicides used to eradicate headlice: malathion, carbaryl and phenothrin. The recommended treatment is usually changed every three years. Pharmacists, GPs and community nurses should be aware of the need to use the recommended pediculicide.

Mr Jones discussed the planned audit with his staff and agreed with them the methods of data collection. He prepared an explanation sheet for them giving details of the audit (Table 2).

Audit benefits

- **To the patients/customers**

a) Safe and effective treatment
b) Control of resistance to treatment

- **To the pharmacy**

a) Consistent information given to customers
b) Customers more aware of local policy, hence time saved in pharmacy
c) Reduced stockholding of non-policy products
d) Increased customer loyalty

Continued on PVIII ▶

D C Revy/Science Photo Library

Continued from PVII

Analysis of results

Data was collected in the pharmacy for two weeks and Mr Jones calculated the overall percentage adherence to the local policy and the percentage adherence by prescribers and the pharmacy.

● **Evaluating performance**

When Mr Jones compared the overall performance of the pharmacy and the prescribers with his standard, he found that it had not been achieved.

He identified the main reasons for non-achievement. In most cases, malathion was not sold to the customer because it had previously been used without success, or because staff were unable to convince the parent to use the product. Mr Jones discussed his findings and possible changes with his staff.

● **Implementing changes**

There were several changes which could be made to improve the performance of the pharmacy in counter prescribing malathion. They were:

a) Staff training in all aspects of headlice treatment and prevention

b) Increased personal involvement in sales and advice

c) Window and poster displays giving information about headlice infestation, detection, treatment and encouraging parents to seek advice

d) Leaflets given out with all headlice products.

Mr Jones decided that it might be worthwhile to meet the local GPs informally and to show them his results, and discuss ways of improving their prescribing of the locally recommended product.

● **Monitoring change**

In order to monitor the effectiveness of the changes in the pharmacy, Mr Jones intends to audit the adherence to headlice policy every six months and to communicate his findings to his own staff and the local GPs.

Regularly auditing this topic will maintain his own awareness of the importance of counter prescribing in his pharmacy according to the local policy.

Table 2: Audit of adherence to headlice policy

● **Aim/objective**

To determine the level of adherence to the local headlice policy by the pharmacy and local prescribers

● **Standards**

All headlice products sold or given out on prescription should be in accordance with the local policy

● **Data collection**

Data collection will last for at least two weeks

The local recommended pediculicide is malathion

Data collection will be carried out as follows:

– Prescriptions

a) Separate and count all prescriptions for headlice products at the end of the day

b) Count those for malathion

c) Calculate the percentage of prescribed headlice products which are for malathion

d) Fill in a daily record

– Over the counter sales

a) Record the daily sales of the various headlice products and calculate the percentage sales of malathion or monitor stock movement as shown in Table 1A

Table 1A: Monitoring stock movement of headlice products

Stock	Malathion	Carbaryl	Phenothrin
Initial stock (A)	16	–	–
Delivered stock (B)	48	–	–
Final stock (C)	4	–	–
Dispensed stock (D)	20	–	–
Sales = A+B-C-D	40	–	–

Table 1B: Daily record of head lice products sold or dispensed

Day	Number of headlice products dispensed	Number of malathion products dispensed	Sales of headlice products	Sales of malathion	Percentage malathion dispensed	Percentage malathion sold
Mon	4	2	6	4	50%	66.6%

80% of your customers suffer from Back Pain ...

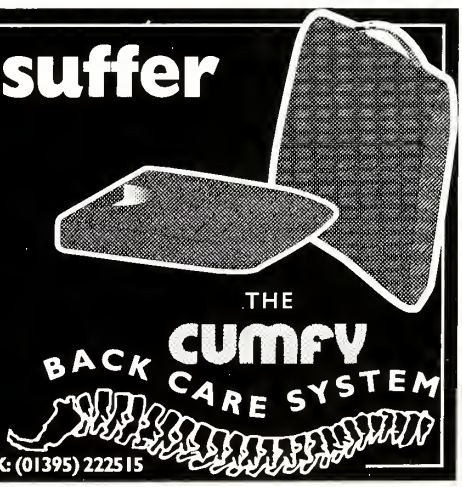
Available for the first time is the Cumfy Back Care System, specially designed cushions which bring relief from back pain.

Stocking these products can bring pain relief for them and attractive profits for you.

The medical profession have been recommending our product for 25 years.

Order today from your wholesaler with supporting POS

POSTURE PRODUCTS LTD P.O. BOX 31, EXMOUTH, DEVON EX8 2YT TEL: (01395) 224455 FAX: (01395) 222515



TEAM PLAYER

Not many pharmacies sell products to make basketball shoes less slippery, or grip enhancers for wet weather sports. But these are just some of the items that a Cardiff pharmacist stocks as part of a successful and rapidly growing sports medicine business. Adrienne de Mont talks to Mark Hopkins

Mark Hopkins brought his sporting background into play

Dealing in sports medicine has made Mark Hopkins feel like a professional again. "People respect my advice and some even ask if I want paying for it!" he says. "The specialist customers we see here have usually been referred by a consultant or physiotherapist. They ask what products I can recommend, I give them a selection to try, and even if they buy something, they ask how much the initial consultation cost. Their reaction is one of surprise when I say it was free!"

Mark bought Hopwoods Pharmacy in 1991, after two years with Lloyds and a year selling unit trusts (which he describes reservedly as "a challenge"). The shop is in the Maelfa Shopping Centre, Llanedeyrn, on the outskirts of Cardiff.

It is a depressed area, where unemployment is high, and he soon became disillusioned with the financial rewards of traditional pharmacy, especially with six other pharmacies in a two-mile radius. He started to look for a less competitive area in which to diversify.

SPORTS FREAK

He had always been sports mad, having played schoolboy football for Swansea and captained the University of Wales golf team. So why not sports medicine?

He started by approaching Cardiff University and offering to obtain all their requirements at prices competitive with mail order. In the shop, he expanded his basic range of first aid items and sports supports, and became more orientated towards injury treatment and prevention.

In June, 1994, he carried out a major refit to reduce the dispensary area and make more space in the front shop. This now has two gondolas, ten metres of shelving and a window display dedicated solely to sports-related items, supports and rehabilitation aids.

Having won the university tender he decided to forge links with GPs, physiotherapists, orthopaedic consultants, local sports clubs and the nearby BUPA Sports Injury Centre.

Once physiotherapists and other specialists started to refer patients, he realised that, although he had a good range of products for ordinary customers, they were not sophisticated enough for the top sportspeople.

So he carried out intensive research, tracking down quality products from overseas. He believes he now has a far better selection than sports shops and is probably the only retail outlet in Wales selling such a specialised range.

"Our knee supports, for example, range in price from $4.95 to $499," he says.

His main competition comes from mail order, but he has the advantage that his customers can examine products and try them on in the fitting room.

This is something that physiotherapist Steve Cannon appreciates. He treats top rugby players and athletes, including Colin Jackson, and has been using Hopwoods for about a year.

"I used to get my supplies from wholesalers," he told *C&D*. "But now I can go round and ask Mark for advice on what's available. It's much better having this personal service. I think the clinical relationship between physio and pharmacist is proving beneficial to all, particularly to patients."

TRAINING

Mark gained his knowledge of sports medicine by reading widely, going to training sessions and spending time with physiotherapists when they were treating players.

This means he gets to see some good matches. A highlight is to assist the team physio before and after the match, and to run on with the oranges when the Barbarians play in the UK! Although a Swansea supporter when young, he feels it would be bad for business to favour one particular team.

A regular customer is Welsh international rugby player Mike Rayer, who broke his leg last year and came to the pharmacy for help with rehabilitation. Mark was able to obtain a special ankle support from the US.

Says Mr Rayer: "It's a great facility to have this sort of shop out of town. There aren't many outlets selling these products and you can get both prescriptions and rehabilitation products under one roof. It's definitely a step in the right direction."

Having become an expert on equipment, Mark takes care not to encroach on other health professionals' territory. He supplies leaflets on exercise but would

Continued on P18 ▶

◀ Continued from P17

leave advice on specific exercise regimes to the physiotherapists.

"I don't want to give the impression I'm a world expert on everything," he says.

For pharmacists wishing to diversify into sports medicine, he suggests starting with a small range, such as Aet or Vulkan. Cheap copies are not worth stocking, as brand names are important to sportspeople.

"Pharmacists are losing this business to mail order," he says. "But it's no good filling the shop full of sports goods and calling yourself a specialist. You need to get the professional backing of GPs, physiotherapists and casualty doctors, and that takes time and effort. Then you can balance referrals from professionals with impulse sales from people coming in off the street. It won't take long before business snowballs.

"Every person coming in with a prescription for an NSAID is a potential customer. We sell a lot of our supports to elderly people with back problems and arthritic conditions."

HELPING HANDS

Companies especially helpful to him when he started were Vulkan, which gave advice on what to stock; and Bauerfeind, which loaned expensive items until he had established a sales pattern. Bauerfeind and distributor Pharmaforce gave demonstrations at an open evening when the pharmacy refurbishment was completed last November.

The advantages of selling sports-related items are that the POR can be as high as 300 per cent, although he refuses to reveal which product that is!

"The sports enthusiasts and specialist customers who come here don't have a problem with prices. They're active people who want to stay active. Paying $500 for a knee brace may sound a lot but not if it means you can go skiing again – it's less than the cost of a skiing holiday. Although I give people lots of products to try, they usually plump for the most expensive because it's the most comfortable and the best quality."

When he advertised knee supports at the start of the skiing season last November, he sold over a dozen at an average price of $60-$70 each. But in spite of customers' willingness to pay, he is to form a separate company, Hopwoods Sports Medicals Ltd, to cater specifically for clubs and associations – mainly because he finds that pharmacies have a reputation for being expensive.

"Once the sports clubs see our prices, they realise that we are not, but I didn't want the word 'Pharmacy' to inhibit our growth."

Having made the link with key personnel and sports club buyers, he runs special promotions to keep interest alive. His latest pre-season offers are likely to lead to the combined sale of 5-10,000 elastic adhesive bandages and zinc oxide tapes.

"Twelve months ago we were selling only 200," he says.

Another promotion aims to show how to prevent sports injuries. Together with physiotherapist Steve Cannon, he is inviting trainers to a series of evening functions to demonstrate the use of athletic taping. He imports the Mueller range from the US as he thinks it is among the world's best and was developed by a pharmacist.

"In the US, most athletes and team sports players from the age of 12 or so have some sort of taping or strapping done before they go on the pitch, as a preventive measure, otherwise they don't qualify for health insurance. In the UK we go more for treating the injury after it's happened."

Musculo-skeletal problems are often badly managed in the UK, he believes.

"GPs tend to give NSAIDs and say 'Come back in two weeks', by which time the patient is two weeks late for physiotherapy and may also have to wait a long time for an NHS appointment. We refer people to a physiotherapist first and then to a GP if necessary."

Sports medicine now accounts for one-fifth of his OTC turnover, in a business which has an NHS:OTC split of about 60:40.

He supplies 15 physiotherapists, three colleges or universities and about 30 clubs – rugby, football, water-skiing and ice hockey.

WORLD CLASS

"We provided the Welsh physio with last-minute supplies for the World Cup in South Africa. It was very pleasing that we had everything he needed in the quantities required."

Although his wife, Deborah, does the occasional locum, he would like a regular locum to run the pharmacy while he concentrates on the sports side.

"It's getting to the stage where, physically, I won't be able to handle both. Many of the products we supply involve accurate measuring and fitting which can take up valuable time. I really need to focus more on sports medicine by talking to people, increasing our marketing and services.

"It's a hobby that's grown out of all proportion," he says.

Mark Hopkins is willing to advise other pharmacists wishing to start a sports medicine section and to supply local clubs. He can be contacted on 01222 731179.

Rubbing shoulders

Nearly half the British population takes part in sporting activities every month and suffers from 2 million injuries a year. And those same complaints account for around 8m lost working days a year

Growth of the topical analgesics market has been fuelled by the increasing number of products made available by POM to P switches, which have been heavily promoted.

The market is worth about $21.1 million, an increase of 38 per cent year on year, according to Roche Consumer Health. Topical analgesic rubs and creams account for two-thirds.

Rhone-Poulenc Rorer estimates that the market for NSAID gels is worth about $6m, with Oruvail gel accounting for one quarter.

While professional sportspeople enjoy the back-up of professional advisers, the amateur regularly turns to the pharmacist for instant advice. Independent research shows that about 80 per cent of all muscle injuries are sports-related, says Rhone-Poulenc Rorer. Of those suffering from sprains and strains, twice as many opt for self-treatment rather than consult a GP.

PR Spray: a sponsor

Radian-B: united display

To capitalise on key sporting events, such as Wimbledon and the Rugby World Cup, Oruvail gel advertorials are appearing in *Tennis '95* and *Rugby World*. New POS is available this year.

HIGH GROWTH

According to Roche, another high growth sector is bath additives, now worth $1.3m, of which Radian-B claims a 95 per cent share.

The Radian-B range has recently been repackaged. This year's second burst of television advertising, targeting third age and sports users, is scheduled for November. Other advertising is appearing in third age and lifestyle press, while public relations includes nationwide sampling of mineral bath sachets, advertorials and competitions.

Says product manager Nigel Conquest: "Our research has shown that the variants should be displayed together to increase shelf visibility and encourage cross usage of products."

Pharmacy POS merchandise, comprising shelf edgers and dummy boxes, are available from Roche representatives, as are consumer leaflets.

INNOVATION

Crookes Healthcare says innovation is one of the main factors responsible for recent growth in

New targets for Ralgex

topical analgesics, with the new NSAIDs attracting new consumers to this sector. PR Freeze Spray was relaunched in response to consumer and trade demand for a more environmentally-friendly formulation.

PR Sprays is sponsoring the FIA's 'Commit to get fit' campaign this year.

Copies of the Nurofen consumer booklet, 'How to cope with sports injuries', are available free from: Nurofen/Sports Injuries Booklet, Nurofen Advisory Service, PO Box 193, Nottingham NG3 2HA.

YOUNG DIRECTION

Smithkline Beecham is targeting a new generation of Ralgex users this year, by promoting to young people who play sport.

Senior product manager Sara Hyland says: "We believe we have identified a new market among young sports players, who will occasionally suffer sports injuries and may need educating about injury prevention as well as treatment."

There will be advertorials and competitions in popular youth sports magazines. Prizes include Ralgex sports bags, rugby shirts, stop watches and sports wear.

Public relations in adult publications will maintain the brand's presence with older users.

SPORT BALM

Weleda Sport Balm is a natural massage and body lotion to invigorate tired limbs (75ml tube, $3.95). Ingredients include calendula and witch hazel, blended with aromatic oils in a non-greasy lotion. It can be used before or after sport.

A 10ml trial size tube ($0.75) forms part of an introductory offer. There is a specially discounted launch parcel of ten free 10ml packs with every purchase of an outer of six 75ml packs.

A new eight-page booklet on Weleda medicines forms part of the company's 70th anniversary promotional campaign. Available free to retailers, it will also be sent by direct mail in response to customer inquiries.

'Weleda Revue' is a new consumer publication for retailers to give to valued customers over the summer. It will also be sent to over 45,000 households known personally to Weleda, as part of this year's direct mail campaign. A further edition is planned for the autumn.

HOT AND COLD

Cold and hot first aid have long been recognised as effective drug-free treatments for minor injuries and they are widely used in other European countries.

3M Health Care is intending to grow the UK market with a new range of cold/hot packs. Core markets are likely to be with sports enthusiasts, as well as elderly people suffering from rheumatic disorders.

The Cold Hot pack ($4.99) can be heated in water or a microwave and cooled in the fridge or freezer. For on the spot treatment of sports injuries, the Cold Instant pack ($4.99) and Cold Instant Plus pack ($5.99) become ice cold in seconds without refrigeration. The reusable Hot pack ($3.99), with an insulated layer on one side, is intended for aches and pains associated with arthritis, stiffness and cramps.

NATURAL RELIEF

Fastaid Relief-Xtra has a summer advertising campaign in sports publications, including athletics, cycling and tennis titles. Each offers a free trial pack. Fastaid is the medical sponsor of the Leeds Classic in August, providing paramedic cover for a third year. Samples of Fastaid Relief-Xtra trial packs will be distributed to competitors and spectators.

POSTER CAMPAIGN

Salonpas pain-relieving patches will be supported by a national $60,000 poster campaign from July to October, prompted by increased distribution.

Weleda: celebrating

Made in Japan, the patches contain menthol, methyl and glycol salicylate. When applied to the point of pain, they have a warming, then cooling, effect.

Distribution has been limited for the past two years, but sampling at sporting events, such as the London Marathon, has increased demand. As a result, Boots has agreed to give national distribution.

● Public relations activity for Potter's Comfrey ointment is aiming at sports enthusiasts. Press releases are being sent to the sporting and consumer press, with possible reader offers.

First aid facts

Pfizer Consumer Healthcare has produced a 'Facts for the first aid box' card in support of TCP. The card offers a quick reference to dealing with bites, bleeding and burns. Copies may be obtained by sending an sae to TCP FAF, PO Box 12, West PDO, Lenton, Nottingham NG7 2GB.

TCP will be supported by an advertising spend of £1.8 million in 1995, with advertisements appearing in national newspapers throughout the year.

Says marketing director Malcolm Phillips: "TCP has the strongest ancestry of any product in the first aid box. It has been used by generations for all basic first aid because it is an excellent multi-purpose antiseptic for the treatment of most domestic accidents."

Beacon & Janis, manufacturer of Stericrepe bandages, has introduced a mixed pack for the smaller retailer. The pack contains six each of the 2.5, 5 and 7.5cm bandages.

Stericrepe is a porous rubber crepe bandage which adheres only to itself and not to skin or hair.

TCP: getting the facts into the first aid box

Special help for fitness fanatics

BCB can offer pharmacies individual first aid and sporting injury kits tailored to a particular sport.

Instead of selling off the shelf kits, the company works with each customer to design a kit for their individual needs. Alternatively, pharmacists can refer customers directly to BCB which will pay a 'finder's fee' or commission.

Rugby and football players suffer many knee injuries, so the Richards knee immobiliser is being promoted to their clubs.

A special kit has just been designed for off-road, four-wheel-drive vehicle events. Aimed at the cross-country driver who may get injured or stranded some way from assistance, the kit contains basic first aid and survival items in a robust green plastic box ($18.95).

A range of standard kits is also available. The latest first aid product is a burn glove, which holds sterile saline solution.

Body of evidence

Each year in the UK there are about 19 million incidents resulting in new injuries that require medical supports.

"No wonder the sports supports market has been growing at the rate of 25 per cent per annum," says Vulkan UK's managing director, Richard Walker, adding that his own company's turnover has increased by over 40 per cent in each of the past two years.

"Pharmacists who do not offer a range of medically-approved sports and medical supports are missing out on a growing market which offers quick turnover, good margins and takes up the minimum of space," he says.

"It was the overwhelming body of scientific evidence in support of the products' claims that convinced me the brand had a great future," explains Mr Walker. "We are convinced that our position as clear market leader has been achieved because we can demonstrate superiority in product design, materials and manufacturing; a support programme for stockists, in the form of POS material and staff training; endorsement from the world's top sportsmen and women; and by the fact that the product range is consistently recommended by eminent medical practitioners."

The products are said to:

- aid stretching and flexing by keeping the area warm. A warmer muscle, tendon or ligament is far less likely to be injured than one that is cold
- assist rehabilitation by increasing blood flow over the damaged area while giving added support
- provide three-dimensional elasticity to help counteract swelling both during or after exercise
- help cushion against further blows.

Mr Walker recommends that pharmacists establish working relationships with local physiotherapists and sports injury clinics to provide a source of referred customers and give an unbiased view of the business.

First foot forward

Janssen Pharmacy Division is supporting Daktarin with advertising in the national and specialist press and public relations. Point of sale material and consumer literature are available for pharmacies.

Daktarin: sporting appeal

The packaging of Daktarin spray powder has been redesigned to enhance its sporting appeal to both men and women. New dark green and grey livery features strong graphics to highlight its position as a leading treatment for athlete's foot.

Support campaign linked to events

Seton Healthcare is running a new advertising campaign for the Prosport range of sports supports. National newspaper advertisements will be complemented by full pages in sporting interest titles, which tie in with key sporting events this summer and autumn. Promotions and POS are also available.

A blister kit of cushioned, self-adhesive skin protectors is the latest addition to the Prosport range.

Seton Healthcare points out that sports-related goods offer a year-round opportunity to pharmacists. Knee and ankle injuries are the most common, with contact sports, such as rugby, and racket sports being responsible for the most injuries. Merchandising sports-related products together, as well as in the usual fixture, helps to increase sales.

The company offers merchandising stands, including a new basket for Transvasin, and can help pharmacists wishing to expand in this area.

1925-1995
WELEDA
70 YEARS
of
CARING
FOR YOU NATURALLY
Anthroposophic & Homoeopathic
Medicines & Natural Bodycare

Putting It Together Better Than Ever

- Record National Advertising
- New Product Launches
- New Support Literature
- New Training Resources
- Colourful POS Material

Weleda (UK) Ltd, Heanor Road, Ilkeston, Derbyshire DE7 8DR
Tel: 01159 448200 Fax: 01159 448210

Active therapy is caught in the Act

Bauerfeind recently introduced the Act range of joint supports, following extensive experience in orthopaedic therapy.

Trials have shown that incorporating correctly-positioned, anatomically-shaped, visco-elastic inserts into a joint support improves performance and comfort, and accelerates healing when compared with conventional joint supports.

The company says that Act brings the benefit of what has become known as 'active therapy' to a much wider section of the community through their local pharmacies.

The supports offer up to 43 per cent POR. They come with a counter merchandiser, patient leaflet dispenser and display board explaining the benefits. Pharmacists are supplied with personalised letters to send to other healthcare professionals, physiotherapists, sports clubs and schools, advising that they are now stocking pharmacy-exclusive supports.

Further information is available from Pharmaforce (tel: 01572 821648) or Bauerfeind's pharmacy helpline (tel: 01252 376543).

Infectious information

Half of all athlete's foot sufferers play sport at least once a week. Traditionally, athlete's foot was regarded as a male complaint, but the incidence in women is increasing with the rise in popularity of exercise classes and leisure centres. The ratio of those afflicted is now about 61 per cent male to 39 per cent female, according to Crookes Healthcare's Rebecca Judd.

TGI data shows that swimming is the most popular sport among those with athlete's foot (30 per cent); 13 per cent of sufferers play badminton; 12 per cent golf, almost 12 per cent cycle; and nearly 9 per cent are footballers.

Given this link, Crookes is continuing Mycil's sponsorship of swimming, in particular the ASA Masters Championships which is to be held in Sheffield during October. Advertising, aimed at both men and women, runs in the national consumer press and selected sports publications until November.

A booklet and poster called 'Give feet a sporting chance' is being distributed to health clubs, local authority leisure centres and colleges.

For pharmacists there is a 'Guide to fungal infections', an assistants' training module and POS leaflets for customers. A poster, produced in conjunction with the Society of Chiropodists and aiming to raise awareness of sporting foot and fungal infections, will be available to pharmacies, GPs, practice nurses and chiropody clinics.

The company recently launched Mycil Gold cream, containing clotrimazole 1 per cent, for the treatment of more persistent cases of athlete's foot and other fungal infections (*C&D* **Counterpoints**, June 3).

According to Ms Judd, the market for athlete's foot preparations is worth around about £10 million and growing in value at about 11 per cent a year. A small and fairly static proportion of GSL products (about 18 per cent) go through grocers, but this is an area in which independents can succeed by using good merchandising and displays.

She believes that linking athlete's foot with healthy activities, such as sport, will help to reduce the stigma around what was once an embarrassing complaint associated with poor hygiene.

Pharmacies look on the bright side

There's no improvement in sight for baby and beauty products, but employment and stock trends point to a stable market, according to the respondents in the latest *C&D* Business Trends survey

In spite of falling margins and an ever-eroding share of the non-healthcare market, pharmacists are surprisingly confident about the future of their individual businesses.

However, they are not so optimistic about the continuing existence of retail pharmacy, nor the health of the industry in general, according to the recently-released latest Miller Freeman Business Trends survey.

Only one in ten pharmacists is optimistic about the future of retail pharmacy, but a third feel confident about the fate of their own shops.

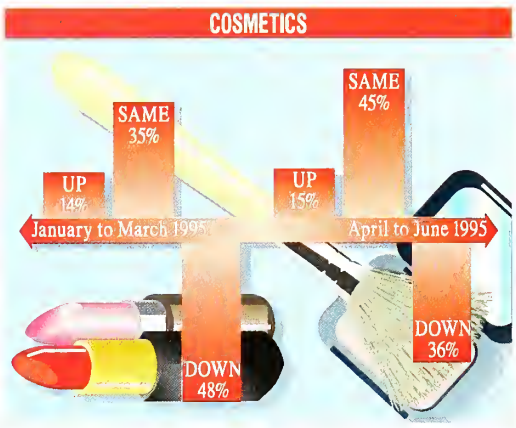
Nearly 160 pharmacies across the country were questioned about their performance for the first quarter and asked what their predictions were for the next three months. They were questioned about every area of their companies' activities, from prices and margins to staffing levels and business optimism.

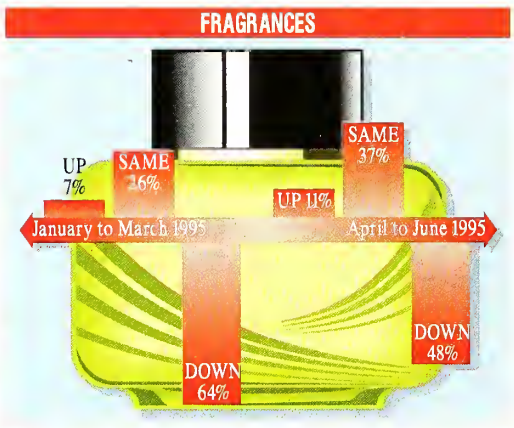
INDEPENDENTS

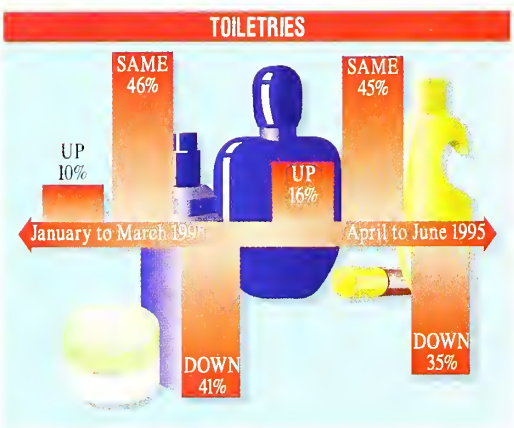
Group head shops, their branches and independents were all surveyed. Independents' sales performance was worse in the first quarter than that of multiples. However, more multiple shops expect sales to be lower in April, May and June, compared with the same period last year. On a regional basis, the majority of shops in Scotland and the North lost sales early in the year, but business was mixed for the rest of the country.

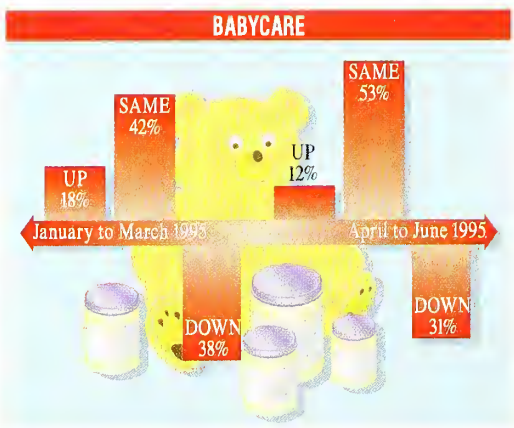
Margins were hit as over half (54 per cent) of pharmacies experienced lower ones in the beginning of 1995, compared with the first three months of 1994. The survey discovered that margins are spiralling downwards. In each quarter they have been worse than the same three months of the preceding year.

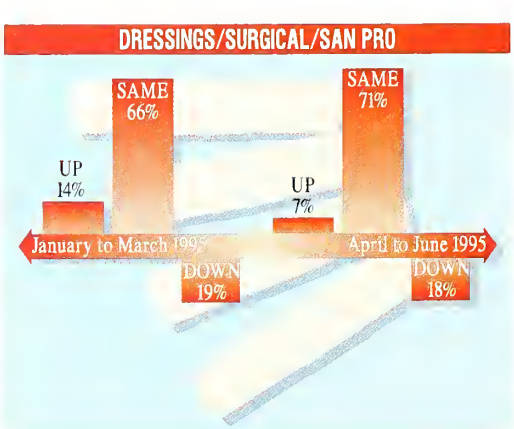
Independents and head branches reported more incidences of falling profits in the first quarter than group branches. The normally-prosperous South East region was worst affected, with 63 per cent of pharmacists

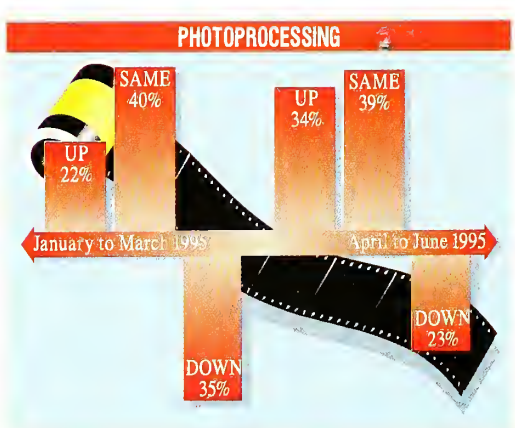












recording lower profits in the New Year, compared to early 1994, with panellists in that area the most pessimistic about improvements in the second quarter.

The majority of outlets expect margins in the second quarter to be comparable with the same time last year.

Trends gleaned from the survey over a two-year period reinforce the message that alternative outlets – mainly supermarkets – have taken a large slice of the non-healthcare market. Pharmacies are still performing strongly in their traditional areas of business, which include prescriptions, over the counter medicines and dressings/sanitary protection/surgical.

SCRIPTS UP

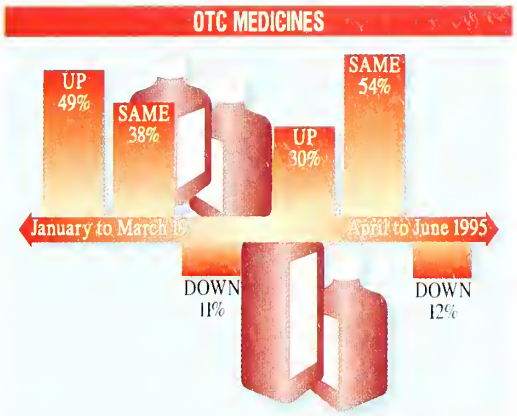
More prescriptions were processed – probably due to the extended winter season. This trend was not predicted by respondents in the last survey. Over half the pharmacists interviewed (55 per cent) processed more prescriptions than in the same period last year. Only 34 per cent forecast a rise in the volume of prescriptions.

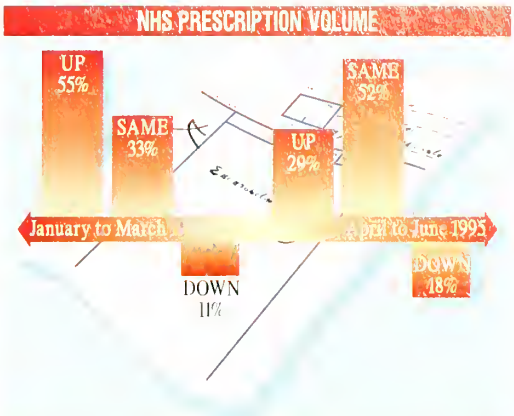
All types of outlet predicted that prescription business would slow down in the second quarter. Expectations are for a similar level of business to the second quarter last year.

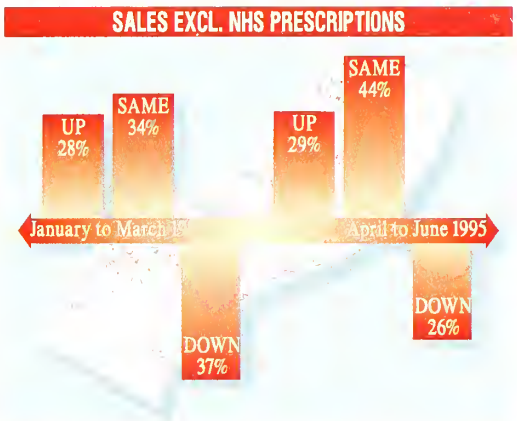
A large proportion of respondents in all regions registered a growth in prescriptions. This applied particularly to the South, Wales and Scotland. On balance, pharmacists are less optimistic about the second quarter of this year compared to the same time last year.

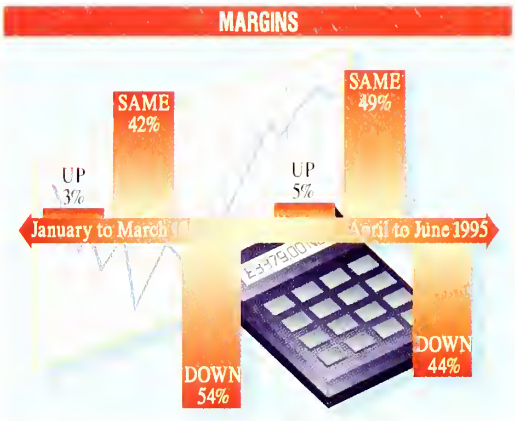
Sales of beauty and baby care products were poor in comparison to more traditional pharmacy products. The survey has discovered that this appears to be a long-term trend. It has affected large and small pharmacies alike, although independents have experienced the brunt of it. This trend is set to continue with forecasts of low sales for the second quarter, compared to the same period in 1994.

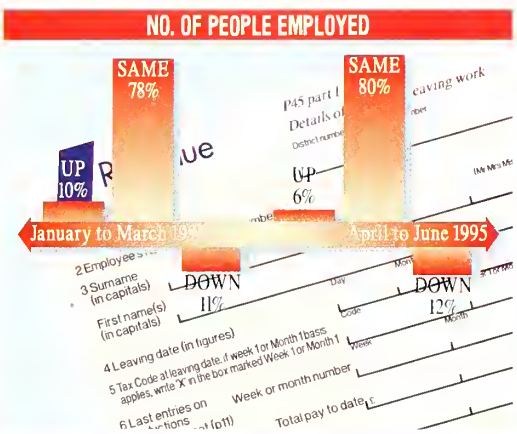
Since 1993, the actual sales of cosmetics, toiletries, fragrances and baby care have not met forecast expectations. Only sales of items such as dressings/surgical/sanpro and photoprocessing rose above or met forecast sales in the same period.

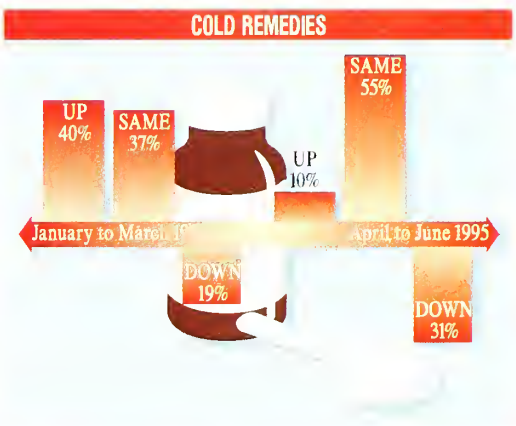


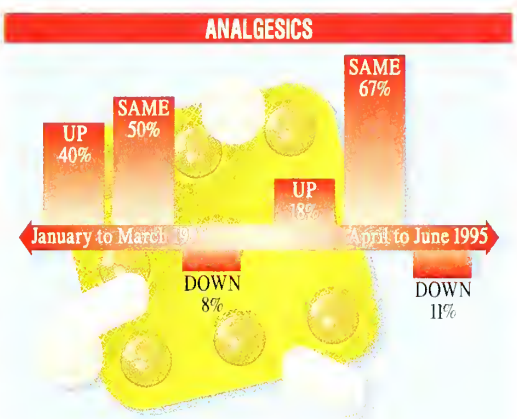


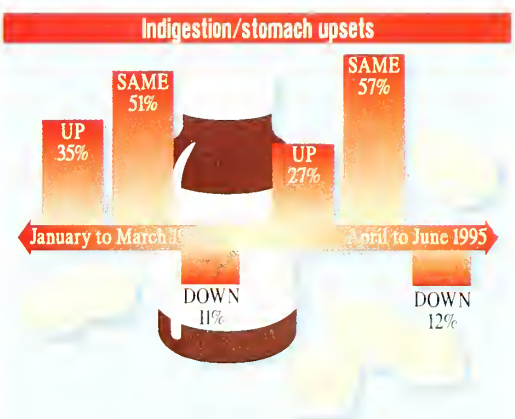












OTC BOOM

Medicinal products (over the counter medicines, cold remedies, analgesics and indigestion remedies) showed the most growth of all product areas. But panellists are not optimistic that sales will continue to improve; it is thought more likely that they will mirror the same quarter of last year.

The volume and value of stocks was comparable to the first quarter of last year and pharmacies don't anticipate any change in the next three months. By region, experience was mixed, with the North East and South East experiencing lower stock compared to the Midlands, South West and Wales, which all reported the highest increases in volumes.

Employment is also likely to remain stable, but more pharmacies in the North East than any other region had to reduce their staff in the first quarter, and this is thought to be likely to continue in the next three months. A fifth of group branches increased their staff numbers, compared with the same period in 1994.

By and large, and as one would expect, the biggest revenue generators had the most stable employment numbers.

Correction

Unichem's European alliance is called IPSO, not Tredimed, as was stated in last week's wholesaling feature (*C&D* June 24, p1006). Tredimed is the name of the European alliance between AAH, Gehe and OCP.

Natwest award

Pharmacists able to demonstrate expertise in merchandising, customer service, training and use of technology may have a chance of becoming the Natwest Streamline Independent Retailer of the Year. The closing date for aspiring winners is September 15 and entries should be sent to: Sally Rawlings, Natwest Streamline, Independent Retailer Excellence Awards, Card Services, Level 18, Drapers Gardens, 12 Throgmorton Avenue, London EC2N 2DL.

UK asthma submission

Zeneca has applied for UK approval for its asthma drug Accolate. The drug, in tablet form, is the first in a new generation of asthma treatments.

FDA all-clear for Valtrex

Glaxo Wellcome has received clearance from the US Food and Drug Administration to market its shingles treatment, Valtrex, the successor to Zovirax.

LPC fights crime

Liverpool LPC was recently instructed on the finer points of crimefighting by drugs squad officer DC Peter Duggan, whose primary message was: if the villain says 'hands up', do it. A list of dos and don'ts, published in bullet-point form, has been distributed to Liverpool contractors and will sit in the CD register.

SB in biotech collaboration

Smithkline Beecham has announced a manufacturing alliance for its penicillin products with Gist-brocades, an international group of biotechnology companies. The link will build on the latter's knowledge in the manufacture of penicillin G and 6-APA, both components of SB's Amoxil/Clamoxyl and Augmentin.

MCA green light

The Medicines Control Agency has given the go-ahead for British Biotech to restart trials of its cancer treatment, Batimastat. Phase II trials for patients with malignant pleural effusion will start in the third quarter of 1995.

Pharmacies under scrutiny from taxman

The taxman may be casting his eagle eye over pharmacies following the publication of an Inland Revenue report, warns accountancy firm KPMG.

The Business Economic Notes on Dispensing Chemists is the 22nd Inland Revenue report on a specific business or trade. Prior to the BEN series, such reports were not available to the public.

"From my experience as a tax inspector, the publication of such a note thrusts a trade or profession to the forefront," says David Cunliffe, a KMPG tax specialist.

He maintains that all businesses covered by previous notes have become, and continue to be, subjects for greater scrutiny by inspectors. Targets for further investigation, warns Mr Cunliffe, may include pharmacies, whose businesses are 10 per cent outside normal profit levels.

"Prevention is better than cure," he advises. "If there is something that is not quite right with your accounts, talk to the Revenue. Voluntary disclosures can avoid a chunk of the penalty charges."

The Inland Revenue maintains there are pros and cons associated with the publication of such a report. "The report encourages inspectors to scratch beneath the surface and look at deeper factors rather than just gross profit figures," says report author David Lewis. "On one hand it encourages them to dig a bit deeper, but on the other, it helps them understand the business better."

The 28-page document chronicles the decline in gross profits achievable from NHS dispensing over the last nine years. In 1986, when the prescription charge was £2.40, gross profit was 24.7 per cent of turnover for a pharmacy dispensing 1,500 scripts a month. By 1994, even with charges hiked up to £4.75, this figure had dropped to 21.4 per cent.

The report suggests that ancillary services, such as testing and health advice, are the way "to maximise the value of the pharmacists' training and knowledge". It is these comparatively new pharmacy services, which will be scrutinised by inspectors.

UK top of R&D charts

UK pharmaceutical companies scored highly on research and development expenditure, compared to international rivals, a recent DTI report shows.

The 1995 UK R&D Scoreboard shows that the industry in this country increased expenditure by 11 per cent, double the rate of foreign competitors. However, it is questionable whether the UK pharmaceuticals industry will maintain its current spend.

An Association of British Pharmaceuticals Industry spokesman says: "While the strength of our science base and the stable market of the NHS has contributed to R&D growth, it has to be said that the future is a bit more uncertain. Large-scale rationalisation of the drugs industry, caused by worldwide government pressures on drugs costs may affect future expenditure."

Last year, Glaxo was the biggest investor in R&D in the UK industry, spending $858 million. Wellcome spent $346m, but the merger will produce economies of scale in which R&D is a factor.

Other UK companies have also hived off R&D activities this year. Fisons unloaded its onto Astra, and Boots sold its pharmaceuticals operation to BASF.

Cannon Babysafe, the company which brought you the Avent babyfeeding range, has had a £5 million cash injection by venture capital group 3i. Cannon managing director Edward Atkin (left), pictured with Andrew Hartley of 3i, plans to use the cash to develop new products and extend current facilities

Tambrands to be investigated for anti-competitive tactics

Tambrands has been referred to the Monopolies and Mergers Commission in the belief that it is acting anti-competitively.

The MMC is to investigate Tambrands' practice of offering both major retailers and pharmaceutical wholesalers extra volume discounts, on the proviso that they stock the entire Tampax range.

Jeffrey Preston, director general of Fair Trading, made the referral on the grounds that this condition may bar new entrants to the sanpro market or limit retail space for other competing brands.

The tampons market has been subject to two previous MMC investigations into fair trading in the 1980s, but this is the first time a single tampon company has been investigated under Section 5 of the Competition Act 1980. The report is due at the end of the year.

Flu plague pushes drug sales to $2bn

A population plagued by colds and flu earlier in the year boosted UK drug sales in pharmacies by 9 per cent to $2 billion, compared to the first four months of 1994.

According to research group IMS International, drugs sales in the four months to April in the world's top ten markets grew 11 per cent over the first quarter of 1995, with the US the biggest and fastest-growing market.

Germany topped European sales with a 10 per cent rise to $5.4bn, followed by France at 9 per cent and $4.8bn, respectively.

Classified

Cancellation deadline 10am Friday; one week prior to insertion date
Display/Semi Display £26 per single column centimetre, min 3x1
Box Numbers £10.00 extra. Available on request.
All rates subject to standard VAT
Publication date every Saturday
Copy date 4pm Tuesday prior to publication date.

Post to Classified Advertisements, Chemist & Druggist,
Miller Freeman PLC, Sovereign Way, Tonbridge, Kent TN9 1RW
Tel: Tonbridge (01732) 364422 Telex: 95132 Fax: (01732) 368210
Ring Nick Fisher (01732) 377272 for further information.

APPOINTMENTS

MOSS CHEMISTS

Add a healthy outlook to your local community

MANAGERS

• Burnley • Corby • Hunstanton
• Norwich • Redhill • Stoke on Trent

RELIEF MANAGERS

(Would suit newly qualified)

• Bristol • Dundee • Glasgow • Humberside (North & South) • Mid-Glamorgan • Norwich

Continued growth has created career opportunities for pharmacists with the personality and drive to make a real impact on local community healthcare.

Experienced or newly qualified (full training will be given), we need an individual with a commitment to patient counselling, coupled with the communication skills and management qualities to actively market a wide range of medicines and healthcare products.

In return, you'll enjoy the full support of a highly professional company, modern well equipped and efficient facilities, and a competitive salary and benefits package. This will include; PPP membership, pension scheme with life assurance and generous staff discounts.

Apply with CV to: Mr Roger Cotton MRPharmS, Moss Chemists, Fern Grove, Feltham, Middlesex TW14 9BD. Telephone: (daytime) 0181 890 9333, (after 7.30pm) 01276 26429.

UniChem
A MEMBER OF THE UNICHEM GROUP OF COMPANIES

CAD12537

SUCCESSFUL SALES REPRESENTATIVES REQUIRED

Impharm Nationwide Ltd — a major player in the generic and imports market is growing and now requires experienced representation in various areas of the United Kingdom. An excellent reward package awaits those who are prepared to work hard and have a desire to be number one!

Please send your CV to:

The Sales & Marketing Manager
Impharm Nationwide Ltd
PWS Building
Nelson Street
Bolton BL3 2JW

IMPHARM NATIONWIDE

Impharm Nationwide — part of the Intercare Group plc

Pharmacy Plus

Bristol

Due to expansion a vacancy exists for a young enthusiastic pharmacist. Rotational and managerial post with a pioneering company that developed
"Group Pharmacy Practice"
(Pharm) J Feb 4 1995, C&D Jun 17 1995)

- Drug Information (Medicines Hodine)
- Repeat Prescribing Clinics
- Smoking Cessation Clinics
- Community Based Clinical Trials
- NHS Chiropody
- GP Training/Primary Care Meetings
- Health Promotion

Join us and develop your career, excellent package.

Application closing date July 15th. For an application form please contact Mr Tariq Muhammad (0117) 9853388.

PART-TIME PHARMACIST WANTED IN LEEDS AREA

2 or 3 days a week. Totally flexible. Hours and days to suit.

Varied work and good back up staff. Top pay for right person.

Tel: day 0113 263 7501 (home) eves 01274 831631

READING, BERKSHIRE

Part-time Dispensing Assistant (mornings) required for newly opened health centre pharmacy.
Must be enthusiastic, friendly and reliable.
Please apply in writing outlining career to date to:

Mrs P. Way MRPharmS
Caversham Pharmacy
57 Church Street
Caversham, Reading
Berks RG4 8AX

NORTH EAST COAST

Independent Pharmacy in attractive North East coastal town requires an experienced, enthusiastic pharmacist full time (min 4 days a week considered). For busy and wide variety of professional work.

Please tel 01287 622820 after 6.30pm

PETERBOROUGH PHARMACY MANAGER

Full/part time, easily run pharmacy, no paperwork, salary negotiable.

Tel: 01733 342081/322776 or after 7pm 01733 349498

SATURDAYS. Experienced pharmacist available for Saturdays. London or Home Counties near London. Tel: 0181 7713300.

FOREST GATE E7. Pharmacy Assistant required part-time in modern pharmacy. Must be friendly and reliable. Previous experience prefered but can train. Tel: 0181 534 1652.

PHARMACIST required for week commencing Monday 31st July to provide locum cover. 9am to 6pm. Must be prepared to work. Tel: (01903) 200100.

MANCHESTER and surrounding areas. Reliable and experienced pharmacist available from July onwards Tel: 0161 792 0383.

PUTNEY, LONDON SW15. Pharmacist required for mainly dispensing duties. Hours 9am-6pm Mon-Fri. Excellent salary. Send cv to Supt. Pharmacist, 114 Upp Richmond Road, London SW15 2SP

TOWERBRIDGE (STOCKWELL). Experienced pharmacist/long term locum required now to run branch pharmacies. Good supporting staff. Minimum paperwork and fully supportive pre reg students. Contact Anju daytime (0171 7039800).

MAIDSTONE, KENT. Pharmacist Manager required for community pharmacy Sat half day. Job share and self employed considered. Tel: 0171 722-5221 or 01923 771187 (eve).

APPOINTMENTS

EXPANDING PHARMACEUTICAL GROUP

FIELD SALES (ALL AREAS) TELESALES (F/T AND P/T)

PART QUALIFIED ACCOUNTANCY GRADUATE AND RECEPTIONIST

Previous experience in parallel import sales or purchasing is an advantage but not essential. Well above average income for persons who work hard and have a strong desire to WIN!
Newly qualified graduates may apply if lack of sales experience is made up by a flair for business and the ability to work under pressure. Send CV and telephone number to:

The Sales Director, A1 Pharmaceuticals, Unit 3/4 Bessemer Park, 250 Milkwood Road, Herne Hill, London SE24 0HG.

AGENTS

PRISM HEALTHCARE/SANTO

"Triomar" "Imagine" "Pizazz"
"Jerome Russell" "Pretty Quik"
"Sweet 'N Low" "Suntona" "Stain Slayer"
"Puressa" "Nail the Habit" "Kingfisher"

We are looking for Commission Agents to sell our ranges of well advertised and brand leading products including those shown above, to Chemists in the following areas:

HAMPSHIRE - SUSSEX & KENT - W. MIDLANDS

NORTH WALES, MERSEYSIDE & CHESHIRE

Please write to: **Mrs M. Taylor, Personnel, Santo Products Ltd., 1-2 Church Way, Edgware, Harrow, Middlesex HA8 9AA or telephone 0181 952 0668**

AGENCIES WANTED

ADDITIONAL PRODUCTS REQUIRED BY LONG ESTABLISHED ACTIVE AGENT IN NORTHERN IRELAND

All replies acknowledged.

PLEASE REPLY TO BOX NO: 3490

LOCUMS

Provincial Pharmacy Locum Services

We have over **3,000** pharmacists registered! Plus experience of handling over **100,000** bookings **NATIONWIDE!**

OUR BUSINESS

Place your locum problem in the hands of our experienced co-ordinators. We will inform you the moment cover is found. We leave you to get on with doing what you do best, **running your business.**

PLEASE CALL NOW!

EDINBURGH 0131-229 0900
NEWCASTLE 0191-233 0506
MANCHESTER 0161-766 4013
SHEFFIELD 0114-269 9337
BIRMINGHAM 0121-233 0233
CARDIFF 01222 549174
LONDON 01892 515963
EXETER 01392 422244

MATERNITY COVER — Tamworth. Small, new pharmacy. Locum for six full weeks, Mon-Fri, 9-5.30pm. Sept-Oct, 1995. Please enquire. Tel: 01827 262488.

LOCUM REQUIRED from July to November 1995 to cover 13 assorted weeks in Carshalton (near Croydon), nearest underground Morden. Tel: 0181 6448972 daytime, 0181 6610975 evenings.

PUTNEY, LONDON SW15. Saturday locum pharmacist required, hours 9am-2pm. Tel: 0181-785 3016.

LOCUM REQUIRED for a quiet and pleasant shop in Kingston for one to two weeks from the 5th of August. Hours of service from 9am-1pm only, Monday to Friday. Tel: 0181 546 0372.

NORWICH + 20 miles radius. Experienced locum now taking bookings for August/September. Please phone 01603 702502 evenings.

LONDON SE14 — Locum required from 6th July 1995 to 28th July 1995 (Mon-Fri). Tel: 0181 692 3725.

BUSINESSlink

A FREE Service for Chemist & Druggist Subscribers

EXCESS STOCK

TRADE LESS 50% - Staril x 28, Parlodel 5mg x 100, Parlodel 10mg x 100, Cedocard 40 TAB, Provera 400mg x 90, Suscard 1mg, Clinoril 200mg x 100, Tremonil 5mg x 50. Tel: 01708 743341.

TRADE LESS 30%+VAT+POSTAGE - 1 x 100 Cafergot tabs (exp 8/95). Tel: 01772 796142.

TRADE LESS 30%+VAT - 6 x 20 x 2ml Bricanyl Respules 2.5mg/ml (exp 4/96), 1 x 112 Hexopal forte C-PAK (exp 10/95), 5 x 10mls Hypurin neutral insulin (exp 12/95). Tel: 01286 880323.

TRADE LESS 40% - Convatec S363, Convatec S865, Convatec S232, Convatec S297, Convatec 5246, Hollister 3149, Hollister 3549, Biotrol elite 32-435, Conveen leg bay 5170. Tel: 01624 673912.

TRADE LESS 25% - 2 x 15 Hollister 3539, 1 x 30 Hollister 3319, 1 x 10 Hollister 3610, 3 x 30 Coloplast MC2000 5920, 4 x 10 Coloplast sheets 3210, 3 x 10 Surgicare 5270. Tel: 01665 710896.

TRADE LESS 30%+VAT - 400 Lopid 300mg, 112 Lamictal 100mg (exp 7/96), 3 Oxivent inhaler (exp 12/95), 6 Imigran 100mg (exp 8/97), 300 Betaloc 100mg (exp 3/97). Tel: 01232 301638.

TRADE LESS 30%+VAT+POSTAGE - 100 Furadantin 50mg (exp 9/95), 90 Importal sachets, 60 Minodiab (exp 97), 14 Eucardic 25, 10x0.2ml Fragmin 2500iu (exp 97), 12 Relaxit micro enemas. Tel: 0116-287 2832.

TRADE LESS 30%+VAT - 59 Ventolin 5mg nebules (exp 9&12/95), 24 Faverin 100mg tabs (exp 9/95), 27 Froben SR caps (ex 10/95), 90 Asacol 400mg tabs (exp 9&11/95). Tel: 0117-965 5287.

TRADE LESS 30%+VAT - 30%+VAT - 340 Sabril 500mg (long date). Tel: 01570 480387.

TRADE LESS 30%+VAT - Azathioprine 25mg, Coversyl 4mg, Epanutin 25mg & 50mg, Kaodene suspension, Manerix 150mg, Sustac 6.4mg (all exp 9/95). Tel: 01460 240430.

TRADE LESS 35%+VAT+POSTAGE - Biotrol elite 1x30 36835 424 tabs, Hytrin 2mg. Tel: 0161-445 1999.

TRADE LESS 30%+VAT - 100 Lopid 300mg (exp 7/95), 56 Lopid 600mg (exp 10/95). Tel: 01254 680890.

TRADE LESS 20% - 50 Nebcin 80mg/2ml, 100 Atromid S, trade less 40% 6x10 Simpla Trident bags 500ml S/T. Tel: 01474 533047.

TRADE LESS 25%+VAT+POSTAGE - 56 new Predictor tests 2 (exp 3/96), 8 new Predictor test (exp 2/96), 66 Merocets (exp 7/98), 72 Pollon-eze tabs (exp 11/97). Tel: 01903 200267.

TRADE LESS 25%+VAT+POSTAGE - Hollister 4514 5x15, Hollister 4404 7x5, 60 Uniparin CA 5000 IU 0.2ml, Convatec S627 2x5, Convatec S246 3x5, Fresubin vanilla 500mlx21 (exp 3/96). Tel: 01634 817317.

TRADE LESS 40%+VAT - Acezide tabs 2x28 (exp 7/96), Antabuse tabs 200mg (exp 4/96), Arpicolin (procyclidine) syrup 4x500ml (exp 3/96), Clexane amps 2x10x0.2ml (exp 9/96). Tel: 01332 342597.

TRADE LESS 30%+VAT - Diumide K (exp 3/96), Sabril sachets (exp 8/97), Uniphyllin 300mg/400, Maxepa (exp 1/98), Questran sachet (exp 6/98). Tel: 0181-527 1358.

TRADE LESS 25%+VAT+POSTAGE -

EXCESS STOCK CAUTION

Pharmacists are responsible for the quality, safety and efficacy of medicines they supply. In purchasing from sources other than manufacturers or licensed wholesalers, they must satisfy themselves about product history, conditions of storage and so on.

ANNOUNCEMENTS

HELP!

If you have experience of countering a leap-frog affected by a relocation into a surgery please **telephone 01208 72935**

BUSINESS FOR SALE

GLASGOW (West End)

Long established community retail pharmacy for sale. Turnover in excess of £450,000.

Further particulars from:

NESS GALLAGHER & CO, Solicitors, Wishaw

Tel: 01698 351794

FRANKLAND & Co.

STOCKTAKERS, VALUERS & TRANSFER AGENTS

219 Harrison Road, Belgrave, Leicester, LE4 6QN

Telephone (0116) 266 5299 Facsimile (0116) 261 0284

SPECIALIST IN PHARMACY STOCKTAKING, VALUATION AND TRANSFERS NATIONWIDE

If you are considering selling your business or interested to buy one, contact:

Mr R. A. Hickinbotham for a confidential discussion

TVI

Comprehensive stocktaking and business transfer service

URS

QUALITY ASSURED ORGANISATION

BUSINESS FOR SALE

NEW

ALLIANCE VALUERS & STOCKTAKERS

AVS

Telephone: Harrogate (01423) 531571

MORECAMBE (Lancs)

Urgent sale required of long established community pharmacy. Estimated T/O £350,000. NHS items average 2,600 per month. New lease or freehold with two bed maisonette available. Offers invited for GW/Fix from parties able to expedite an early completion.

S W WALES

Retirement sale of ESP in delightful rural setting. A family business operated from attractive freehold property with four bed living accom. Business and property £115,000 + SAV or will sell business/NHS contract for relocation at £20,000 + SAV.

VALUATIONS & ADVICE GIVEN TO PURCHASERS
SPEAK TO ONE OF OUR EXPERTS TODAY

COMPUTER SYSTEMS

PACE Beta Computers

Professional Patient Recording and Labelling For Professional Pharmacies

When you replace your old labelling equipment you'll want a fast, efficient system that's simple to use. You will demand a system with *guaranteed* data security. You will require a system with a proven track record that won't let you down. But if you would also like 12 months interest free credit - you *must have* Pace Beta, the professionals choice
To arrange a no-obligation demonstration in your pharmacy.

☎ **0161-941 7011**

PACE BETA COMPUTERS, FREEPOST ALM 1610, ALTRINCHAM WA14 1AR

PILLS – Patient Medication Records
POSHH Checkout – EPOS

Hadley Hutt Computing Ltd

George Bayliss Road, Droitwich, Worcs. WR9 9RD

Telephone: 01905 795335

Fax: 01905 795345

PROMOTED

BUSINESSlink

A FREE Service for Chemist & Druggist Subscribers

Flixotide 500mcg diskhaler 4x56 (exp 9/95), Hytrin 10mg (exp 96), 30 Eldepryl 10mg (exp 1/96), 100 Eldepryl 5mg. Tel: 0181-539 1922.

TRADE LESS 30%+VAT - 100 Aldactone 50mg (exp 7/97), 90 Yutopar 10mg (exp 2/96), 84 Anturan 200mg (exp 12/96), 100 Anafranil 50mg (exp 12/95). Tel: 01232 301638.

TRADE LESS 30%+VAT+POSTAGE - 14 Erythroped A sachets (exp 11/95), 2x300ml Lioresal liquid (exp 10/95), 2 Suprefact nasal spray (exp 8/95), 100 caps Neurontin 100mg (exp 10/96), 419 Nozinan tabs 20mg (exp 99). Tel: 0116-266 8548.

TRADE LESS 30%+VAT - 2x56 Sinemet CR (exp 11/96), 125 Fucidin tabs 250mg (exp 9/96). Tel: 01222 842515.

TRADE LESS 15%+VAT+POSTAGE - 45x28 Proscar tabs (exp 8/96). Tel: 0181-980 4421

TRADE LESS 30%+VAT - Isoket retard 40 3x50, Algitec tabs 80, Baxan caps 68, Benoral tabs 110, Suprefact nasal 1x10, Humulin M1 2x5x1.5ml. Tel: 01932 842632.

TRADE LESS 30%+VAT - 3x300ml Cyklokapron syrup (exp 11/96), Freeway Multivolt nebuliser car lighter attachment, £75. Portable oxygen cylinder, Sabre £70, 175 Pentasa 250mg. Tel: 01222 494373.

TRADE LESS 25%+VAT+POSTAGE - 2x30 Coversyl 4mg, 2x15 Ortho-Gynest pess, 1x56 Frumil, 1x250 Brufen 400mg, 7x15 Sporanox caps. Tel: 0181-567 2922

FOR SALE

JRC PMR SYSTEM & CITIZEN PRINTER - All in fully maintained condition - £500 ono. Tel: 01203 222447.

NEW COLLECTION 2000 STAND - nearly new, with approximately £400-£500 worth of stock, would exchange with Max Factor, Yardley or Rimmel. Tel: 0181-340 6503.

ALL FIXTURES & FITTINGS FROM PHARMACY - Includes perfume cabinets, counters, dispensary fittings, shelving, available in August. Tel: 0171-381 8651.

NOMAD TRAYS - and inserts. Tel: 0121-557 5903.

CCTV - Including video recorder, buyer to collect £100. Tel: 01203 635178 Coventry.

WANTED

GENOTROPIN MULTIDOSE 3614 - Tel: 01827 280647

SHORT OR OUTDATED PROCESSABLE COLOUR FILMS - Tel: 0181-427 1454.

GERIMAX - OTC multivitamin/mineral tabs, any quantity OTC. Tel: 01493 842737.

PROFASI 5000 - must be within expiry date, or Pregnyl 5000. Tel: 0121-747 2920.

NOBRIUM 5MG CAPS - Tel: 01482 354260.

BARBER'S CHAIR - or similar item intended for chiropodist's use. Tel: 01502 572603.

NOMAD CASSETTES - must be in good or unused condition. Tel: 0181-989 0070.

SURGICARE CONVATEC S312 - S320, S353, Coloplast MC5740, Biotrol Elite 32835. Tel: 01963 250259.

EXCESS STOCK CAUTION

Pharmacists are responsible for the quality, safety and efficacy of medicines they supply. In purchasing from sources other than manufacturers or licensed wholesalers, they must satisfy themselves about product history, conditions of storage and so on.

The Power of the Multiples.....

UK's fastest growing network of independent pharmacists

.....the Privilege of Independence.

Wish to become a member? Please contact us Today.

Nucare

Nucare plc
447 Kenton Road
Harrow
Middlesex HA3 0XY
Tel: 0181-732 2772
Fax: 0181-732 2774

medielite plc

TEL: 0181-841 4144
FAX: 0181 841 8390

S P E C I A L S S P E C I A L S S P E C I A L S

★ NEW KODAK ★ NEW KODAK ★ NEW KODAK ★

KODAK GOLD FILM

	NETT PRICE	% OFF	TRADE
GA 135x24 EXPS (100ASA)	1.48	40%	
GA 135x36 EXPS (100ASA)	1.90	40%	
GB 135x24 EXPS (200ASA)	1.79	33%	
GB 135x36 EXPS (200ASA)	2.26	33%	
GC 135x24 EXPS (400ASA)	2.04	28%	
GC 135x36 EXPS (400ASA)	2.54	28%	

E&OE — GOODS SUBJECT TO AVAILABILITY

MEDIELITE PLC
BELVUE BUSINESS CENTRE
UNITS 16 & 17 BELVUE ROAD
NORTHOLT, MIDDX UB5 5QQ
TEL: 0181 841 4144 FAX: 0181 841 8390

GB LABORATORY & CHEMICAL PRODUCTS LTD

Suppliers of:

★ Latex Examination Gloves (Distributors enquiries welcome)
★ B.P. & BPC Grade Sulphurs

Elms House • The Elms Industrial Estate
Church Road • Harold Wood • Romford • Essex RM3 0JU
Tel: 01708 381669 • Fax: 01708 381009

IF YOU HAVE A PRODUCT OR SERVICE TO PROMOTE TELEPHONE NICK FISHER ON 01732 377272 OR BY FAX ON 01732 368210

BUSINESSlink

A FREE Service for Chemist & Druggist Subscribers

Free entries in "Business Link" (maximum 30 words) are restricted to community pharmacist subscribers to *Chemist & Druggist*. No trade advertisements will be permitted. Acceptance is at the discretion of the Publishers and depends upon space being available. Send proposed wording to "Business Link" using the form printed alongside.

Appointments, situations wanted, and businesses for sale will be incorporated as lineage advertisements under the appropriate Classified headings.

To: Business Link, CHEMIST & DRUGGIST, Benn House, Sovereign Way, Tonbridge, Kent TN9 1RW.

PLEASE COMPLETE IN BLOCK CAPITALS

Surname .....

First names .....

Address .....

..... Postcode .....

Personal RPSGB Registration number .....

Telephone Number .....

Proposed advertisement copy (maximum 30 words)

.....

.....

.....

.....

PHARMACY INSURANCE

THE PHARMACY INSURANCE AGENCY P I A

Insurance for ALL in Pharmacy

- Car Scheme 1 ☎ 01245 349666
- Scheme 2 ☎ 01633 654313
- Shop & Contents
- Professional Indemnity ☎ 0121-236 0031
- Home ☎ 01633-654314

WORKING FOR PHARMACY

SHOPFITTINGS

experience the difference...

Pharmacies all over the UK use the specialist knowledge and experience Beanstalk have to offer. For more information ring the FREEPHONE number below, quoting the reference CND 95

0800 137427

BEANSTALK

SPECIALIST PHARMACY SHOPFITTERS

WE WORK IN A PHARMACY EVERY DAY,

JUST LIKE YOU...
We understand the pressures and constraints of running a modern retail pharmacy,
JUST LIKE YOU...
We strive for professionalism, service and trust,
and
JUST LIKE YOU...
we are approved by the NPA.
Just a few reasons why successful Pharmcists have chosen us to plan and refit their business environment.

APPROVED

Edison Road, St. Ives Industrial Estate, St. Ives, Huntingdon, Cambridgeshire PE17 4LF
Telephone St. Ives (01480) 494262
Fax (01480) 495826

WOODSTYLE SHOPFITTING AND DESIGN

Martex

SHOPFITTING

FROM LOW COST PERIMETER SHELVING TO UPMARKET PERFUMERY SHOWCASES TRADITIONAL OR CONTINENTAL DISPENSARIES

CONTACT **MARTIN BAGG** FOR A COMPLETE SHOPFITTING SERVICE FOR THE PHARMACIST

01392-216606

SHOPFITTINGS

AF2 SHOPFITTERS

Specialists in Pharmacies (National coverage)
Anything from a Gondola to a dispensary to a complete refit at very competitive prices.
Contact ANDREW MYLAND ON
(01733) 576554 or (0850) 410866

STOCKTAKERS

FRANKLAND & Co.

STOCKTAKERS, VALUERS & TRANSFER AGENTS

219 Harrison Road, Belgrave, Leicester, LE4 6QN
Telephone: (0116) 266 5299 Facsimile: (0116) 261 0284

SPECIALISTS IN PHARMACY STOCKTAKING NATIONWIDE

TVI Member of the Trade Valuers Institute

Comprehensive stocktaking and business transfer service

URS A QUALITY ASSURED ORGANIZATION

STOCK WANTED

WANTED

Old chemist shop fittings, drug runs, bow cabinets etc.
Complete shop interiors purchased. We try hardest, travel furthest, pay more.
Telephone 01327 349249
Eves 341192
Fax: 01327 349397

VETERINARY SERVICES

'VETCHEM'

PROMOTING ANIMAL HEALTH THROUGH PHARMACY

MAY/JUNE SPECIALS 1995
NEW product SECTINE Flea Spray for Cats & Dogs
Drontal Plus Wormer – Equivurm Plus Syr. & Grans. – Sherless Vamoose Spray
Otodex Shampoo – Telmin KH
RING OUR FREEPHONE NUMBER FOR DETAILS 0800 387348
Brian G. Spencer, Common Lane, Fradley, Lichfield WS13 8LA

To use your credit card for prepayment of Classified Adverts
Call Nick Fisher on 01732 377272

VISA DELTA Access SWITCH

ABOUTpeople

Ashtons' pharmacy in Brighton kicked off Pharmacy Week by inviting local MP Sir Andrew Bowden (left) to launch its contribution to the promotion and the DUMP campaign being run by East Sussex Family Health Services Authority. Ashtons' pharmacist proprietor, Laurence Sprey, is pictured lending a hand

Slippery customers

Two pharmacists have been paid visits by slippery customers from across the Atlantic recently – a South Carolina corn snake and a banana frog.

Ben Flynn, retail pharmacy manager at Lloyds Chemist in Cowley, Oxford, was opening up one morning when he came across a two-foot long snake in the shop window. "I was just relieved I found it, rather than some old dear seeing it by the toilet rolls," says Mr Flynn.

He had spotted the snake slithering out of sight a couple of weeks earlier and had alerted the RSPCA, which told him that it had probably gone outside.

This time Mr Flynn was more prepared and managed to bundle the creature into a box, which was then handed over to the police. It had escaped from its owner who lived above the shop.

Meanwhile, in a Southampton branch of Tesco, pharmacist Marcus Langford came to the rescue of a two-inch banana frog that was found lurking on the supermarket's fruit counter.

The tiny frog, which had travelled with the bananas from the West Indies, had somehow survived refrigeration and spraying with detergents.

Mr Langford, a reptile and amphibian enthusiast, and a member of the British Herpetological Society, took the creature home to look after before handing it over to Poole Aquariam.

Bradford assistants achieve MCA success

Twenty-two counter assistants in the Bradford and Keighley area have successfully completed Part 1 of the Medicines Counter Assistants course. The candidates are pictured below with pharmacist tutors Gary Choo (far left) of Broomhill Pharmacy in Keighley and Judy Hazlehurst (second right) of E&M Hazlehurst in Bradford, and course organiser Pat Smith (far right) of Keighley College. The training programme was supported by Bradford Health Commission.

It's Immense.

It's the Imodium Display Giveaway!

The latest £50 Cash winners are:

L Johnson
L A Johnson Ltd
Wigan

J McFadyen
Lindsay & Gilmour
Edinburgh

Mrs D Barker
Beecham Pharmacy
Malton

Dunn Chemist
Forest Town
Mansfield

Mrs P Langley
Knaphill
Woking

Mrs G Chandarana
Sheerwater
Woking

D Koledria
Emberhart Pharmacy
London E4

Mrs C Chapman
Jai Chemist
Kings Lynn

And remember:

There's a weekend in Paris to be won!

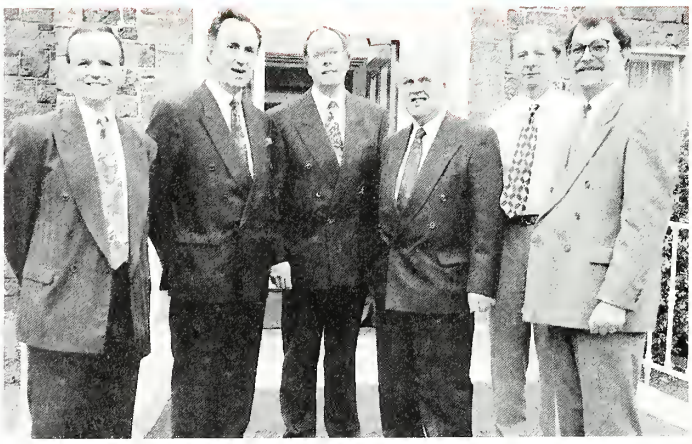
It pays to display Imodium.

Contact your Centra Healthcare Territory Manager for details

CENTRA HEALTHCARE

on **01494 450778**

Entry open to pharmacy assistants only.

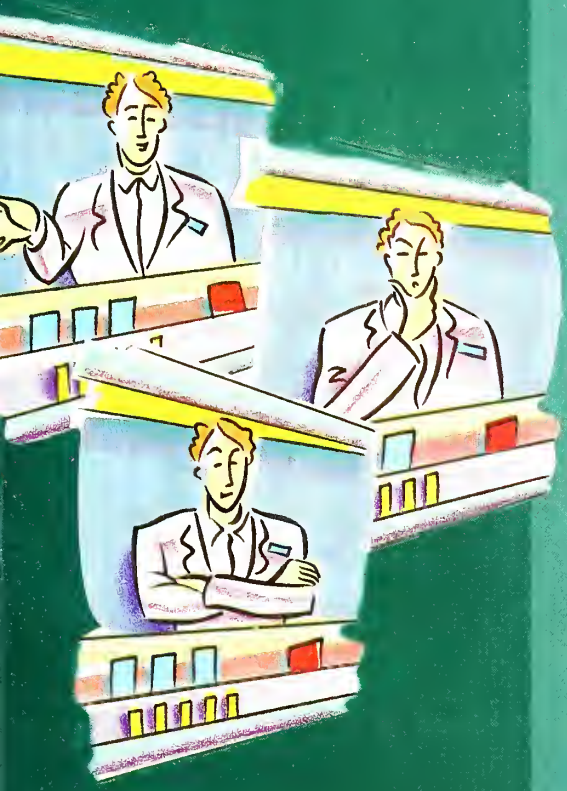


The first Academic Pharmacy Practice Unit has been launched in Northern Ireland to coincide with Pharmacy Week. It is a collaboration between pharmacy staff at Antrim Hospital and the Pharmacy Practice Research Group at Queen's University, Belfast. The launch was attended by Bernard Mitchell (second left), general manager of United Hospitals Group, and Professor Arthur Kingston (fourth left), provost of Queen's University. They are pictured with members of the unit

All rights reserved. No part of this publication may be reproduced or transmitted in any form or by any means, electronic or mechanical including photocopying, recording or any information storage or retrieval system without the express prior written consent of the publisher. The contents of Chemist & Druggist are subject to reproduction in information storage and retrieval systems. Miller Freeman Professional Ltd may pass suitable reader addresses to other relevant suppliers. If you do not wish to receive sales information from other companies please write to Derek Shaw at Miller Freeman Professional Ltd. Film output by London Scanning, 24a Shore Rd,London. Printed by St Ives (Gillingham) Ltd, Gillingham, Kent. Registered at the Post Office as a Newspaper 15/22/168

Money Talks and talk sells...

'Brand leaders can slide when the pharmacist recommends an alternative,' says the second annual Pharmacist Survey by Miller Freeman Professional Limited, publishers of Chemist & Druggist, Community Pharmacy, Beauty Counter and Pharmacy Today.



Word of mouth recommendation is still the best way to sell a product. But what if it's not your product that's being recommended?

The Miller Freeman Pharmacist Survey is a unique analysis of the opinions and actions of the UK's independent pharmacy sector. And it displays quite clearly that no amount of TV or national press advertising can make up for poor levels of in-store recommendation.

In this latest study, 1300 pharmacists responded. The result is a unique insight to pharmacy retailing today, generating an invaluable 60-page management report backed up by over 140 pages of cross-analysis tables.

Facts from the frontline

- 135 behavioural and attitudinal questions answered
- 55 supplier companies rated on key performance and image attributes
- 160 OTC brands assessed for customer request/pharmacist recommendation
- 137 cosmetics/toiletries brands assessed for customer request/sales growth

Preparing for the future

- What drives consumer purchasing decisions?
- Which products contribute most to pharmacy profits and sales growth?
- How do trading conditions in '94/'95 compare to previous years?

plus

the opportunity to purchase the influential 1994 Benn Pharmacy Survey at a special price of £250

Miller Freeman

To order your copy of the Miller Freeman Pharmacy Survey, simply complete the order form below and return it to **Claire Newman, Pharmacy Group, Miller Freeman Professional Ltd, Soverign Way, Tonbridge, Kent TN9 1RW.**

Please invoice me for a copy of the **Benn Pharmacy Survey 1995** @ £1,495 ☐

Please also invoice me for a copy of the **Benn Pharmacy Survey 1994** at the special price of £250 ☐

Name _____ Business Title _____

Company _____

Address _____

_____ Postcode _____

Telephone _____

NEW KWAI ONCE-A-DAY

ARE YOUR CUSTOMERS GETTING ENOUGH?

- Unprecedented consumer demand for new Kwai Once-A-Day since launch.
- Once-A-Day is now the fastest growing garlic brand. (A.G.B. May '95)
- £1 million 'two fingers' national press advertising continues throughout the summer.

So put your fingers on real profit with Kwai Once-A-Day. Stock up now with 30s and 100s by contacting your Scholl representative or call the order line on 01582 482929.

Kwai® ONCE-A-DAY *Real Profit* **THE EASY WAY**

Lichtwer Pharma (UK) Ltd. Dominions House, Eton Place, 64 High Street, Burnham, Bucks SL1 7JT.
Tel: 01628-605275. Fax: 01628-605277.